ID No 1 LOCATION OF WATER WELL: Township Number Range Number 27 County: Meade 5W 33 Distance and direction from nearest town or city street address of well if located within city? 825+4 E from Meade 2 WATER WELL OWNER: Laural Ediger Board of Agriculture, Division of Water Resources RR#, St. Address, Box # Application Number: City, State, ZIP Code Meade, KS 6864 3 LOCATE WELL'S LOCATION WITH 4 DEPTH OF COMPLETED WELL. 160...... ft. ELEVATION: AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1.....ft. 2.....ft. 3..........ft. WELL'S STATIC WATER LEVEL ... 1.3.7. ... ft. below land surface measured on mo/day/yr 1-11-0.2. Pump test data: Well water was ... //5.... ft. after / hours pumping ... 3.0.... gpm ₩ Ķ WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial SW -- SE -Was a chemical/bacteriological sample submitted to Department? Yes. No. ; If yes, mo/day/yrs sample was sub-Water Well Disinfected? Yes CASING JOINTS: Glued. Clamped. 5 Wrought iron 8 Concrete tile 5 TYPE OF BLANK CASING USED: 9 Other (specify below) 3 RMP (SR) 6 Asbestos-Cement 1 Steel **P**PVC 4 ABS 7 Fiberglass Threaded...... Casing height above land surface......in., weight...........lbs./ft. Wall thickness or gauge No......... **PVC** TYPE OF SCREEN OR PERFORATION MATERIAL: 10 Asbestos-cement 5 Fiberglass 8 RMP (SR) 11 Other (specify) 1 Steel 3 Stainless steel 6 Concrete tile 12 None used (open hole) 2 Brass 4 Galvanized steel SCREEN OR PERFORATION OPENINGS ARE: 8 Saw cut 5 Gauzed wrapped 11 None (open hole) Mill slot 6 Wire wrapped 9 Drilled holes 1 Continuous slot 7 Torch cut 2 Louvered shutter 4 Key punched 2 Cement grout Bentonite 6 GROUT MATERIAL: 1 Neat cement What is the nearest source of possible contamination: 10 Livestock pens (4) Abandoned water well 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 1 Septic tank 4 Lateral lines 12 Fertilizer storage 5 Cess pool 8 Sewage lagoon 16 Other (specify below) 2 Sewer lines 13 Insecticide storage 3 Watertight sewer lines 6 Seepage pit 9 Feedyard Direction from well? How many feet? 300 LITHOLOGIC LOG FROM PLUGGING INTERVALS FROM TO 10 topso.(0 65 10 65 70 70 125 boom cla 125 160 sund tyras 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) /-// -.v. :-..... and this record is true to the best of my knowledge and belief. Kansas INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and

Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.