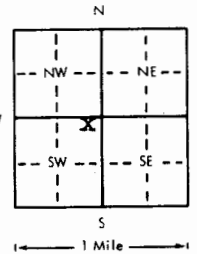


1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: Meade		NE 1/4 NE 1/4 SW 1/4	8	T 33 S	R 28 NW
Distance and direction from nearest town or city? 7 Miles Southwest of Meade, Ks.			Street address of well if located within city?		
2 WATER WELL OWNER: Southwest Gas Storage, Underground Storage Div.					
RR#, St. Address, Box # :		Box 959		Board of Agriculture, Division of Water Resources	
City, State, ZIP Code :		Meade, Kansas 67864		WILLIAMS 1-8 Application Number: -----	
3 DEPTH OF COMPLETED WELL: 305 ft. Bore Hole Diameter: 8 in. to 305 ft. and in. to ft.					
Well Water to be used as:					
1 Domestic 3 Feedlot		5 Public water supply		8 Air conditioning 11 Injection well	
2 Irrigation 4 Industrial		7 Lawn and garden only		9 Dewatering 12 Other (Specify below)	
Well's static water level: 48 ft. below land surface measured on May month 5 day 1981 year					
Pump Test Data: Well water was ft. after hours pumping gpm					
Est. Yield 100 gpm: Well water was ft. after hours pumping gpm					
4 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR)		5 Wrought iron		8 Concrete tile	
XXX PVC 4 ABS		6 Asbestos-Cement		9 Other (specify below)	
		7 Fiberglass		Casing Joints: Glued XXX Clamped	
Blank casing dia 5 in. to 225 ft. Dia in. to ft. Dia in. to ft.					
Casing height above land surface 12 in., weight 2.8 lbs./ft. Wall thickness or gauge No. 265					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel		5 Fiberglass		8 RMP (SR)	
2 Brass 4 Galvanized steel		6 Concrete tile		9 ABS	
				11 Other (specify)	
				12 None used (open hole)	
Screen or Perforation Openings Are:					
1 Continuous slot 3 Mill slot		5 Gauzed wrapped		XXX 8 Saw cut	
2 Louvered shutter 4 Key punched		6 Wire wrapped		9 Drilled holes	
		7 Torch cut		10 Other (specify)	
Screen-Perforation Dia 5 in. to 305 ft. Dia in. to ft. Dia in. to ft.					
Screen-Perforated Intervals: From 225 ft. to 305 ft. From ft. to ft. From ft. to ft.					
Gravel Pack Intervals: From 14 ft. to 305 ft. From ft. to ft. From ft. to ft.					
5 GROUT MATERIAL: XXX Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grouted Intervals: From 4 ft. to 14 ft. From ft. to ft. From ft. to ft.					
What is the nearest source of possible contamination:					
1 Septic tank 4 Cess pool		7 Sewage lagoon		10 Fuel storage	
2 Sewer lines 5 Seepage pit		8 Feed yard		11 Fertilizer storage	
3 Lateral lines 6 Pit privy		9 Livestock pens		12 Insecticide storage	
				13 Watertight sewer lines	
				14 Abandoned water well	
				15 Oil well/Gas well	
				XXX 16 Other (specify below)	
				Gas Storage Well	
Direction from well: XXX West How many feet 100 ? Water Well Disinfected? Yes XXX No					
Was a chemical/bacteriological sample submitted to Department? Yes Rental No XXX If yes, date sample was submitted month day year: Pump Installed? Yes XXX No					
If Yes: Pump Manufacturer's name: Aeromotor Model No. ? HP ? Volts ?					
Depth of Pump Intake ? ft. Pumps Capacity rated at ? gal./min.					
Type of pump: XXXX Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other					
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on May month 5 day 1981 year					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 252					
This Water Well Record was completed on May month 6 day 1981 year under the business name of Friesen Windmill & Supply, Inc. by (signature)					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		LITHOLOGIC LOG			
		FROM	TO	LITHOLOGIC LOG	
		0	2	Topsoil	
		2	51	Clay	
		51	54	Fine Sand	
		54	60	Clay	
		60	220	Blue Clay Swells	
		220	225	Sandy Clay	
		225	235	Med. Sand	
		235	260	Sandy Clay w/Some Caliche	
260	280	Med. Sand			
280	314	Sandy Clay			
ELEVATION: Slope					
Depth(s) Groundwater Encountered 1. Not available ft. 3. ft. 4. ft. (Use a second sheet if needed)					
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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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EW

SEC.

NE 1/4 NE 1/4 SW 1/4