LOCATION OF WATER WELL: Fraction Section Number Township Number 500 1/4 County: Meade Distance and direction from nearest town or city street address of well if located within city? WATER WELL OWNER: Dellow + Fox RR#, St. Address, Box # : Board of Agriculture, Division of Water Resources AN "X" IN SECTION BOX: - NE -8 Air conditioning 11 Injection well WELL WATER TO BE USED AS: 5 Public water supply (V) Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs sample was sub-Water Well Disinfected? Yes TYPE OF BLANK CASING USED: 8 Concrete tile CASING JOINTS: Glued Clamped 5 Wrought iron 6 Asbestos-Cement 3 RMP (SR) Welded 9 Other (specify below) Steel B) PVC 4 ABS 7 Fiberglass Threaded Blank casing diameter in to 326 ft., Dia in to ft., Dia in to ft., Dia in to ft. Casing height above land surface in, weight lbs./ft. Wall thickness or guage No. 200 PVC 8 RMP (SR) TYPE OF SCREEN OR PERFORATION MATERIAL: 10 Asbestos-Cement 3 Stainless Steel 5 Fiberglass 11 Other (Specify) 1 Steel 6 Concrete tile 9 ABS 4 Galvanized Steel 12 None used (open hole) 2 Brass SCREEN OR PERFORATION OPENINGS ARE: 8 Saw cut 5 Guazed wrapped 11 None (open hole) 6 Wire wrapped 9 Drilled holes 1 Continuous slot 10 Other (specify)ft. 7 Torch cut 4 Key punched 2 Louvered shutter SCREEN-PERFORATED INTERVALS: GRAVEL PACK INTERVALS: = 0 ft. to 3.6 ft., From ft., From ft. to ft. Bentonite 2 Cement grout 4 Other..... Neat cement Abandoned water well What is the nearest source of possible contamination: 10 Livestock pens 7 Pit privy 15 Oil well/Gas well 1 Septic tank 4 Lateral lines 11 Fuel storage 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 2 Sewer lines 9 Feedyard 13 Insecticide storage 3 Watertight sewer lines 6 Seepage pit How many feet? 70 Direction from well? FROM LITHOLOGIC LOG **FROM** PLUGGING INTERVALS TO 5" topsoil 5 16 30 16 30 42 46 110 110 115 130 310 280 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No This Water Well Record was completed on (mo/day/yr)

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PAINT</u> 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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.