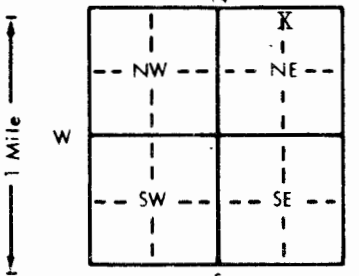


1 LOCATION OF WATER WELL: Fraction NW 1/4 NE 1/4 NE 1/4 Section Number 35 Township Number T 34 S Range Number R 34 E/W
 County: Seward
 Distance and direction from nearest town or city street address of well if located within city?
 3 W and 1 S of Liberal

2 WATER WELL OWNER: Nick Hatcher
 RR#, St. Address, Box # : RR Box 192 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Liberal KS 67901 Application Number: 41914

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

 4 DEPTH OF COMPLETED WELL: 715 ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. 130 ft. 2. ft. 3. ft.
 WELL'S STATIC WATER LEVEL: 130 ft. below land surface measured on mo/day/yr 12/08/97.
 Pump test data: Well water was 179 ft. after 1.5 hours pumping 433 gpm
 Est. Yield: 2300 gpm; Well water was 242 ft. after 2.0 hours pumping 1200 gpm
 Bore Hole Diameter: 26 in. to ft., and in. to ft.
 WELL WATER TO BE USED AS:
 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 industrial 7 Lawn and garden only 10 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes No ; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
 7 Fiberglass certa loc Threaded
 Blank casing diameter: 16 in. to ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface: 12 in., weight lbs./ft. Wall thickness or gauge No. SDR 17.
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)
 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify)
 SCREEN-PERFORATED INTERVALS: From 385-405 ft. to 425-445 ft., From 465-485 ft. to 515-525 ft.
 From 545-565 ft. to 605-625 ft., From 675-715 ft. to ft.
 GRAVEL PACK INTERVALS: From 20 ft. to 715 ft., From ft. to ft.
 From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grout Intervals: From 0 ft. to 20 ft., From ft. to ft., From ft. to ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
 13 Insecticide storage
 Direction from well? South How many feet? 400

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	200	surface sand & clay	440	460	fine to medium sand w/ brown & yellow clay stringers loose
200	300	fine to medium sand w/brown clay streaks loose	460	480	fine sand w/ trace of medium sand & brown & yellow clay stringers loose
300	320	fine to medium sand w/brown clay stringers & dirty streaks loose			
320	360	fine sand w/ trace of medium sand & brown clay stringers loose	480	500	fine sand w/ light colored clay stringers & streaks loose
360	380	fine to medium sand w/ blue stringers loose	500	520	fine sand w/ trace of medium sand & brown clay stringers loose
380	400	fine to medium sand w/ brown clay stringers & hard streaks loose	520	540	fine sand w/ blue clay stringers & dirty streaks loose
400	420	fine to medium sand w/ brown & yellow clay stringers loose	540	560	fine to medium sand w/ blue clay stringers loose
420	440	fine to medium sand w/ brown clay stringers & streaks loose	560	580	fine sand w/ trace of medium sand & scattered blue clay stringers

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 11/25/97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 473 This Water Well Record was completed on (mo/day/yr) 11/25/97 under the business name of by (signature)

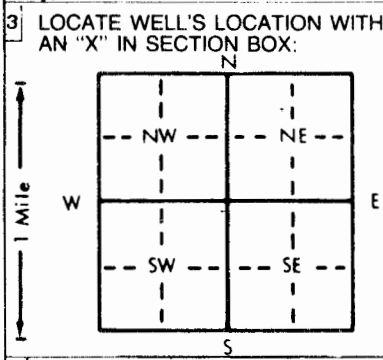
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	1/4 1/4 1/4		T S R	E/W

Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: **Nick Hatcher page 2**

RR#, St. Address, Box # : _____ Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : _____ Application Number: _____



4 DEPTH OF COMPLETED WELL: _____ ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr _____

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter _____ in. to _____ ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	7 Lawn and garden only
		9 Dewatering
		10 Monitoring well
		12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes _____ No _____

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded _____

Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify) _____
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
560	580	& streaks firm			
580	600	fine sand w/ scattered blue clay stringers firm			
600	620	fine sand w/ brown & blue clay stringers firm			
620	640	fine sand w/ trace of medium sand & brown clay stringers firm			
640	660	fine to medium coarse sand w/ brown clay stringers loose			
660	680	fine to medium coarse sand w/ blue clay stringers & streaks loose			
680	700	fine to medium coarse sand w/ brown clay stringers & streaks loose			
700	720	red clay w/ sandy streaks firm			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **11/25/97** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **473** This Water Well Record was completed on (mo/day/yr) **11/25/97** under the business name of _____ by (signature) *[Signature]*

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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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