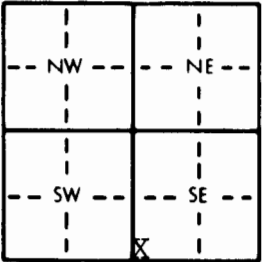


|  |   |                             |                                  |                                |
|--|---|-----------------------------|----------------------------------|--------------------------------|
| 1 LOCATION OF WATER WELL:<br>County: <b>Morton</b> | Fraction: <b>South SW 1/4 of SE 1/4</b> | Section Number<br><b>28</b> | Township Number<br><b>T 34 S</b> | Range Number<br><b>R 39 EW</b> |
|--|---|-----------------------------|----------------------------------|--------------------------------|

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

From Rolla - 4 1/2 miles south, 4 miles east, 40 ft. north &amp; 2,600 ft. west

|   |   |
|---|---|
| 2 WATER WELL OWNER: <b>Dale Easterwood</b>        | Board of Agriculture, Division of Water Resources |
| RR#, St. Address, Box #: <b>HC2 - Box 45</b>      | Application Number: <b>41,867</b>                 |
| City, State, ZIP Code: <b>Rolla, Kansas 67954</b> |   |

|   |  |
|---|--|
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                              | 4 DEPTH OF COMPLETED WELL: <b>525</b> ft. ELEVATION: _____ ft.   |
|  | Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.  |
|   | WELL'S STATIC WATER LEVEL: <b>193</b> ft. below land surface measured on mo/day/yr <b>5-7-96</b>   |
|   | 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: <b>30</b> in. to <b>525</b> 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)  |
|   | <input checked="" type="radio"/> 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well   |
|   | Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____ |
|   | Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>   |

|  |  |   |   |
|--|--|---|---|
| 5 TYPE OF BLANK CASING USED:   | 5 Wrought iron                               | 8 Concrete tile                                 | CASING JOINTS: Glued _____ Clamped _____                  |
| <input checked="" type="radio"/> 1 Steel   | 3 RMP (SR)                                   | 6 Asbestos-Cement                               | 9 Other (specify below) _____                             |
| 2 PVC  | 4 ABS  | 7 Fiberglass                                    | Welded <input checked="" type="checkbox"/> Threaded _____ |
| Blank casing diameter: <b>16</b> in. to <b>280</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.       |  |   |   |
| Casing height above land surface: <b>12</b> in., weight <b>42.05</b> lbs./ft. Wall thickness or gauge No. <b>250</b> |  |   |   |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  | 7 PVC  | 10 Asbestos-cement                              |   |
| <input checked="" type="radio"/> 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:  | 5 Gauzed wrapped                             | 8 Saw cut                                       | 11 None (open hole)                                       |
| 1 Continuous slot  | <input checked="" type="radio"/> 3 Mill slot | <input checked="" type="radio"/> 6 Wire wrapped | 9 Drilled holes   |
| 2 Louvered shutter   | 4 Key punched                                | 7 Torch cut                                     | 10 Other (specify) _____                                  |
| SCREEN-PERFORATED INTERVALS: From <b>280</b> ft. to <b>525</b> ft., From _____ ft. to _____ ft.                      |  |   |   |
| GRAVEL PACK INTERVALS: From <b>20</b> ft. to <b>525</b> ft., From _____ ft. to _____ ft.                             |  |   |   |

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

| FROM | TO | LITHOLOGIC LOG    | FROM | TO | PLUGGING INTERVALS |
|------|----|-------------------|------|----|--------------------|
|      |    | See attached log  |      |    |                    |
|      |    | UNABLE TO PROCURE |      |    |                    |
|      |    | ATTACHMENT        |      |    |                    |

|   |
|---|
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="radio"/> (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>5-7-96</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>208</b> This Water Well Record was completed on (mo/day/yr) <b>5-30-96</b> under the business name of <b>Minter-Wilson Drilling Co., Inc.</b> by (signature) <i>Nora Keller</i> |
|---|

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.