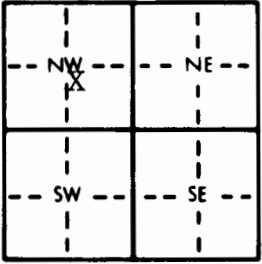


1 LOCATION OF WATER WELL: Fraction Near Center Section Number 2 Township Number T 35 S Range Number R 33 E/W
 County: Seward $\frac{1}{4}$ $\frac{1}{4}$ NW $\frac{1}{4}$

Distance and direction from nearest town or city street address of well if located within city?
From East Side of Liberal, 2 1/4 Miles East, 1 Mile South, 3920 Ft. North and 3780 Ft. West

2 WATER WELL OWNER: Gene Box
 RR#, St. Address, Box #: P. O. Box 782 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Liberal, Kansas 67905-0782 Application Number: 40,401

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


4 DEPTH OF COMPLETED WELL: 535 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 126 ft. below land surface measured on mo/day/yr 11-17-92
 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: 30 in. to 535 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 X; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No X

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded Clamped
 2 PVC 4 ABS 7 Fiberglass _____ Threaded _____
 Blank casing diameter: 16 in. to 260 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight 42.05 lbs./ft. Wall thickness or gauge No. 250
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 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 6 Wire wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 7 Torch cut 9 Drilled holes 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From 260 ft. to 535 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 20 ft. to 535 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 N/A
 Direction from well? _____ How many feet? _____

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

RECEIVED

DEC 23 1993

BUREAU OF WATER

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) 11-19-92 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 208. This Water Well Record was completed on (mo/day/yr) 11-24-92 under the business name of Minter-Wilson Drilling Co., Inc. by (signature) Nora Keller

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.

OFFICE USE ONLY

T

R

EW

SEC.

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