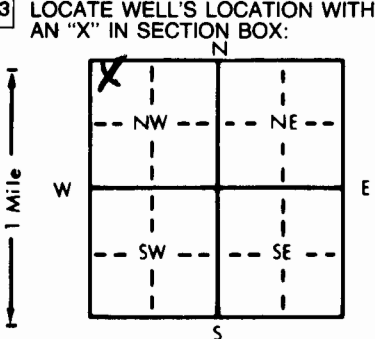


1 LOCATION OF WATER WELL: County: SEWARD Fraction: NW 1/4 NW 1/4 NW 1/4 Section Number: 9 Township Number: T 35 S Range Number: R 33 E

Distance and direction from nearest town or city street address of well if located within city? 905 S. KANSAS Ave., Liberal, KANSAS MW-8

2 WATER WELL OWNER: Jim Madden  
 RR#, St. Address, Box #: P.O. Box 148  
 City, State, ZIP Code: Liberal, KANSAS 67905-0148  
 Board of Agriculture, Division of Water Resources  
 Application Number:



4 DEPTH OF COMPLETED WELL: 171 ft. ELEVATION: ..... ft.  
 Depth(s) Groundwater Encountered: 1, 151 ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL: 151.62 ft. below land surface measured on mo/day/yr: 4-5-95  
 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 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 Threaded  
 Blank casing diameter ..... in. to 141 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 7 PVC 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 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 141 ft. to 171 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 138 ft. to 171 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 2.25 ft. to 136 ft., From 136 ft. to 138 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? West How many feet? 220'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0'	0.5'	Topsoil			
0.5'	15.0'	Silty sand, fine, moderate brown, damp			
15.0'	20.0'	Silty clay, moderate brown, damp			
20.0'	40.0'	Silty sand, fine, moderate brown, damp			
40.0'	60.0'	Silty clay, hard, moderate brown, damp			
60.0'	80.0'	Silty sand, fine, moderate brown, damp			
80.0'	90.0'	Silty clay, hard, moderate brown, damp			
90.0'	100.0'	Sand, fine, pale yellowish brown, moist			
100.0'	150.0'	Silty clay, hard, moderate brown, damp			
150.0'	170.0'	Silty clay, med. plasticity, pale yellowish orange, wet			

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) 3-30-95 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 438 This Water Well Record was completed on (mo/day/yr) 3-30-95 under the business name of KANSAS City Testing by (signature) Bernie Toure

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.