

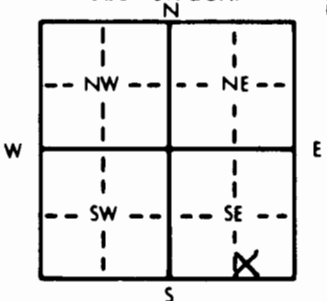
LOCATION OF WATER WELL: County: Seward Fraction: SW 1/4 SE 1/4 SE 1/4 Section Number: 3 Township Number: T 35 S Range Number: R 39 E 1

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

2.1 Miles West on W. 2nd St. Rd.

WATER WELL OWNER: Phil Nix
 RR#, St. Address, Box #: W. 2nd St. Rd
 City, State, ZIP Code: Liberal KS 67905
 Board of Agriculture, Division of Water Resources
 Application Number:

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



DEPTH OF COMPLETED WELL: 101.5 ft. ELEVATION: 2908.60 Bolt

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

WELL'S STATIC WATER LEVEL: 90.8 ft. below land surface measured on mo/day/yr 8/29/95

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: 8 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

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

Blank casing diameter: 4 in. to _____ ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft.

Casing height above land surface: Flush in., weight 2.071 lbs./ft. Wall thickness or gauge No. Sch 40

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

SCREEN-PERFORATED INTERVALS: From 101.0 ft. to 71.0 ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 101.5 ft. to 70 ft. From _____ ft. to _____ ft.

GROUT MATERIAL: 70 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Intervals: From 70 ft. to 3.0 ft. From _____ ft. to _____ ft.

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

Direction from well? How many feet? 240' W

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|-----|----------------|------|----|--------------------|
| 0 | 65 | Sands | | | |
| 65 | 90 | Clay | | | |
| 90 | 115 | Sand | | | |

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) 8/29/95 and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 10/16/95

under the business name of Geotechnical Services, Inc. by (signature) Mont R. Ratt

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.