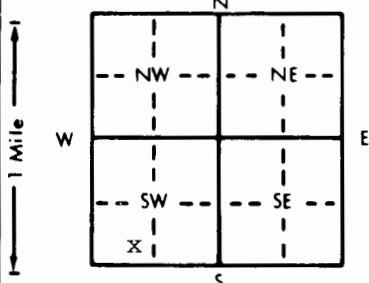


<b>1 LOCATION OF WATER WELL:</b> County: <u>PHILLIPS</u>		Fraction <u>SE 1/4 SE 1/4 SW 1/4</u>	Section Number <u>25</u>	Township Number <u>T 4 S</u>	Range Number <u>R 19 E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>IN THE CITY OF SPEED, KS</u>					
<b>2 WATER WELL OWNER:</b> <u>FRANK BOYD</u> RR#, St. Address, Box # : <u>RR2 BOX 163</u> City, State, ZIP Code : <u>PHILLIPSBURG KS 67661</u> Board of Agriculture, Division of Water Resources Application Number:					
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;"></div>		<b>4 DEPTH OF COMPLETED WELL:</b> <u>52</u> ft. <b>ELEVATION:</b> ..... Depth(s) Groundwater Encountered 1. <u>35</u> ft. 2. .... ft. 3. .... ft. <b>WELL'S STATIC WATER LEVEL</b> <u>35</u> ft. below land surface measured on <u>6-15-98</u> Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Est. Yield <u>40</u> gpm: Well water was ..... ft. after ..... hours pumping ..... gpm Bore Hole Diameter <u>10</u> in. to <u>52</u> ft. and ..... in. to ..... ft. <b>WELL WATER TO BE USED AS:</b> 5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was sub- mitted Water Well Disinfected? Yes No <input checked="" type="checkbox"/>			
<b>5 TYPE OF BLANK CASING USED:</b> 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped ..... <input checked="" type="checkbox"/> PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded ..... Blank casing diameter <u>5</u> in. to <u>32</u> ft. Dia ..... in. to ..... ft. Dia ..... in. to ..... ft. Casing height above land surface <u>18</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No. .... <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <input checked="" type="checkbox"/> PVC 10 Asbestos-cement 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) <b>SCREEN OR PERFORATION OPENINGS ARE:</b> 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot <input checked="" type="checkbox"/> Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) ..... <b>SCREEN-PERFORATED INTERVALS:</b> From <u>32</u> ft. to <u>52</u> ft. From ..... ft. to ..... ft. From ..... ft. to ..... ft. From ..... ft. to ..... ft. <b>GRAVEL PACK INTERVALS:</b> From <u>32</u> ft. to <u>52</u> ft. From ..... ft. to ..... ft. From ..... ft. to ..... ft. From ..... ft. to ..... ft.					
<b>6 GROUT MATERIAL:</b> 1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> Bentonite 4 Other ..... Grout Intervals: From <u>0</u> ft. to <u>30</u> 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
0	8	SURFACE CLAY			
8	10	HARD GRAY CLAY			
10	20	MED GRAY CLAY			
20	30	FINE SAND			
30	35	MED SAND			
35	45	LARGE SAND			
45	50	SOFT CLAY			
50	52	BLUE SHALE			
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>6-15-98</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>444</u> This Water Well Record was completed on (mo/day/yr) <u>6-15-98</u> under the business name of <u>ANDY ANDERSON DRILLING</u> by (signature) <u>Andy Anderson</u>					
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.					