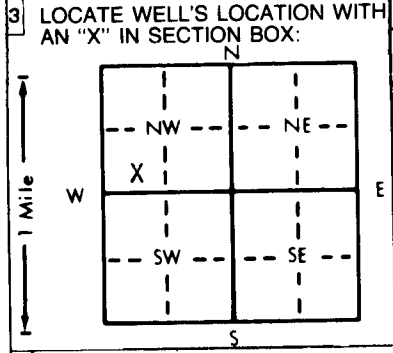


1 LOCATION OF WATER WELL: Fraction SE 1/4 SE 1/4 SW 1/4 Section Number 30 Township Number T 5 S Range Number R 11 EW
 County: SMITH

Distance and direction from nearest town or city street address of well if located within city?
ONE MILE NORTH AND 1/4 4 EAST OF PORTIS, KS

2 WATER WELL OWNER: EMMETT HEYER Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box # : Application Number:
 City, State, ZIP Code : **DOWNES, KS 67437**



4 DEPTH OF COMPLETED WELL: **40** ft. ELEVATION:
 Depth(s) Groundwater Encountered **25** ft. 2. ft. 3. ft.
 WELL'S STATIC WATER LEVEL **25** ft. below land surface measured on mo/day/yr **9-30-94**
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield **15** gpm Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter **10** in. to **40** ft. and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 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 sub-
 mitted Water Well Disinfected? Yes _____ No

5 TYPE OF BLANK CASING USED:
 1 Steel PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)
 Blank casing diameter **5** in. to **25** ft. Dia **160** 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 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)
 SCREEN-PERFORATED INTERVALS: From **25** ft. to **40** ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **25** ft. to **40** ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other
 Grout Intervals: From **0** ft. to **25** ft. From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)
CREEK
450 feet
 Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	Surface Clay			
5	15	Hard Gray Clay			
15	25	Clay and White Rock			
25	35	Large White Round Rock			
35	40	Blue Shale			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was reconstructed (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **9-30-94** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **444** This Water Well Record was completed on (mo/day/yr) **9-30-94** under the business name of **ANDERSON DRILLING** by (signature) *Andy Anderson*

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.