

OFFICE USE ONLY

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| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |            | Fraction                                                                           |                                           | Section Number |            | Township Number                                   |  | Range Number                  |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
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| County: <b>Decatur</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |            | <b>C</b> $\frac{1}{4}$ <b>SW</b> $\frac{1}{4}$ <b>NE</b> $\frac{1}{4}$             |                                           | <b>29</b>      |            | <b>T</b> <b>5</b> <b>S</b>                        |  | <b>R</b> <b>29</b> <b>E/W</b> |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| Distance and direction from nearest town or city street address of well if located within city?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| 2 WATER WELL OWNER: <b>Everett Shuler</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| RR#, St. Address, Box #: <b>101 S Wolfe Ave</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |                                                                                    |                                           |                |            | Board of Agriculture, Division of Water Resources |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| City, State, ZIP Code: <b>Oberlin, KS 67749</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |                                                                                    |                                           |                |            | Application Number: <b>20070414</b>               |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |            | 4 DEPTH OF COMPLETED WELL <b>120</b> ft. ELEVATION: _____                          |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            | Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.               |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            | WELL'S STATIC WATER LEVEL <b>NA</b> ft. below land surface measured on mo/day/yr   |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            | 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 <b>8</b> in. to <b>120</b> ft. and _____ in. to _____ ft.       |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| WELL WATER TO BE USED AS: <b>5</b> Public water supply <b>8</b> Air conditioning <b>11</b> Injection well                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>1</b> Domestic <b>3</b> Feed lot <b>6</b> Oil field water supply <b>9</b> Dewatering <b>12</b> Other (Specify below)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>2</b> Irrigation <b>4</b> Industrial <b>7</b> Lawn and garden (domestic) <b>10</b> Monitoring well                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| Water Well Disinfected? Yes <b>X</b> No _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <div style="display: flex; justify-content: space-between;"> <div> <b>1</b> Steel <b>3</b> RMP (SR)<br/> <b>2</b> <b>PVC</b> <b>4</b> ABS<br/> <b>7</b> Fiberglass         </div> <div> <b>5</b> Wrought Iron <b>8</b> Concrete tile<br/> <b>6</b> Asbestos-Cement <b>9</b> Other (specify below)         </div> <div>           CASING JOINTS: <b>X</b> Glued _____ Clamped _____<br/>           _____ Welded _____<br/>           _____ Threaded _____         </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| Blank casing diameter <b>4.5</b> in. to <b>80</b> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| Casing height above land surface <b>18</b> in., weight <b>2.38</b> lbs./ft. Wall thickness or gauge No. <b>.248</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <div style="display: flex; justify-content: space-between;"> <div> <b>1</b> Steel <b>3</b> Stainless steel<br/> <b>2</b> Brass <b>4</b> Galvanized steel         </div> <div> <b>5</b> Fiberglass <b>8</b> RMP (SR)<br/> <b>6</b> Concrete tile <b>9</b> ABS         </div> <div> <b>7</b> <b>PVC</b> <b>10</b> Asbestos-cement<br/> <b>11</b> Other (specify) _____<br/> <b>12</b> None used (open hole)         </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| SCREEN OR PERFORATION OPENINGS ARE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <div style="display: flex; justify-content: space-between;"> <div> <b>1</b> Continuous slot <b>3</b> Mill slot<br/> <b>2</b> Louvered shutter <b>4</b> Key punched         </div> <div> <b>5</b> Gauzed wrapped <b>6</b> Wire wrapped<br/> <b>7</b> Torch cut         </div> <div> <b>8</b> <b>Saw cut</b> <b>11</b> None (open hole)<br/> <b>9</b> Drilled holes<br/> <b>10</b> Other (specify) _____         </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| SCREEN-PERFORATED INTERVALS: From <b>80</b> ft. to <b>120</b> ft. From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| GRAVEL PACK INTERVALS: From <b>20</b> ft. to <b>120</b> ft. From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| 6 GROUT MATERIAL: <b>1</b> Neat cement <b>2</b> Cement grout <b>3</b> <b>Bentonite</b> <b>4</b> Other _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| Grout Intervals From <b>0</b> ft. to <b>20</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| What is the nearest source of possible contamination:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <div style="display: flex; justify-content: space-between;"> <div> <b>1</b> Septic tank <b>4</b> Lateral lines<br/> <b>2</b> Sewer lines <b>5</b> Cess pool<br/> <b>3</b> Watertight sewer lines <b>6</b> Seepage pit         </div> <div> <b>7</b> Pit privy <b>8</b> Sewage lagoon<br/> <b>9</b> Feedyard         </div> <div> <b>10</b> Livestock pens <b>14</b> Abandoned water well<br/> <b>11</b> Fuel storage <b>15</b> Oil well/ Gas well<br/> <b>12</b> Fertilizer storage <b>16</b> Other (specify below) _____<br/> <b>13</b> Insecticide storage <b>None</b> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| Direction from well? _____ How many feet? _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td><b>0</b></td> <td><b>2</b></td> <td></td> <td><b>Surface</b></td> <td></td> <td></td> <td><b>Stone str</b></td> </tr> <tr> <td><b>2</b></td> <td><b>15</b></td> <td></td> <td><b>Loess</b></td> <td><b>110</b></td> <td><b>120</b></td> <td><b>Yellow ochre &amp; grey shale</b></td> </tr> <tr> <td><b>15</b></td> <td><b>47</b></td> <td></td> <td><b>Clay</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>47</b></td> <td><b>55</b></td> <td></td> <td><b>Fine sand w/clay &amp; sandstone</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><b>Str</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>55</b></td> <td><b>60</b></td> <td></td> <td><b>Sandy clay with a few fine sand</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><b>Str</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>60</b></td> <td><b>67</b></td> <td></td> <td><b>Fine to med sand &amp; gravel</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>67</b></td> <td><b>75</b></td> <td></td> <td><b>Clay</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>75</b></td> <td><b>91</b></td> <td></td> <td><b>Sandstone with clay &amp; caliche</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>91</b></td> <td><b>97</b></td> <td></td> <td><b>Fine to med sand &amp; some gravel</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>97</b></td> <td><b>101</b></td> <td></td> <td><b>Clay</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>101</b></td> <td><b>106</b></td> <td></td> <td><b>Fine sand with lots of clay</b></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>106</b></td> <td><b>110</b></td> <td></td> <td><b>Clay &amp; caliche with a few sand</b></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> |            |                                                                                    |                                           |                |            |                                                   |  |                               |  | FROM | TO | CODE | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS | <b>0</b> | <b>2</b> |  | <b>Surface</b> |  |  | <b>Stone str</b> | <b>2</b> | <b>15</b> |  | <b>Loess</b> | <b>110</b> | <b>120</b> | <b>Yellow ochre &amp; grey shale</b> | <b>15</b> | <b>47</b> |  | <b>Clay</b> |  |  |  | <b>47</b> | <b>55</b> |  | <b>Fine sand w/clay &amp; sandstone</b> |  |  |  |  |  |  | <b>Str</b> |  |  |  | <b>55</b> | <b>60</b> |  | <b>Sandy clay with a few fine sand</b> |  |  |  |  |  |  | <b>Str</b> |  |  |  | <b>60</b> | <b>67</b> |  | <b>Fine to med sand &amp; gravel</b> |  |  |  | <b>67</b> | <b>75</b> |  | <b>Clay</b> |  |  |  | <b>75</b> | <b>91</b> |  | <b>Sandstone with clay &amp; caliche</b> |  |  |  | <b>91</b> | <b>97</b> |  | <b>Fine to med sand &amp; some gravel</b> |  |  |  | <b>97</b> | <b>101</b> |  | <b>Clay</b> |  |  |  | <b>101</b> | <b>106</b> |  | <b>Fine sand with lots of clay</b> |  |  |  | <b>106</b> | <b>110</b> |  | <b>Clay &amp; caliche with a few sand</b> |  |  |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | TO         | CODE                                                                               | LITHOLOGIC LOG                            | FROM           | TO         | PLUGGING INTERVALS                                |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>0</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>2</b>   |                                                                                    | <b>Surface</b>                            |                |            | <b>Stone str</b>                                  |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>2</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>15</b>  |                                                                                    | <b>Loess</b>                              | <b>110</b>     | <b>120</b> | <b>Yellow ochre &amp; grey shale</b>              |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>15</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>47</b>  |                                                                                    | <b>Clay</b>                               |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>47</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>55</b>  |                                                                                    | <b>Fine sand w/clay &amp; sandstone</b>   |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |                                                                                    | <b>Str</b>                                |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>55</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>60</b>  |                                                                                    | <b>Sandy clay with a few fine sand</b>    |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |                                                                                    | <b>Str</b>                                |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>60</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>67</b>  |                                                                                    | <b>Fine to med sand &amp; gravel</b>      |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>67</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>75</b>  |                                                                                    | <b>Clay</b>                               |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>75</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>91</b>  |                                                                                    | <b>Sandstone with clay &amp; caliche</b>  |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>91</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>97</b>  |                                                                                    | <b>Fine to med sand &amp; some gravel</b> |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>97</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>101</b> |                                                                                    | <b>Clay</b>                               |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>101</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>106</b> |                                                                                    | <b>Fine sand with lots of clay</b>        |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| <b>106</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>110</b> |                                                                                    | <b>Clay &amp; caliche with a few sand</b> |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <b>(1)</b> constructed, <b>(2)</b> reconstructed, or <b>(3)</b> plugged under my jurisdiction and was completed on (mo/day/yr) <b>10/22/07</b> and this record is true to the best of my knowledge and belief. Kansas                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| Water Well Contractor's License No. <b>554</b> This Water Well Record was completed on (mo/day/yr) <b>10/29/07</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| under the business name of <b>Woofert Pump &amp; Well Inc.</b> by (signature) <i>Don Woofert</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |
| INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records. <b>PDA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                                                                    |                                           |                |            |                                                   |  |                               |  |      |    |      |                |      |    |                    |          |          |  |                |  |  |                  |          |           |  |              |            |            |                                      |           |           |  |             |  |  |  |           |           |  |                                         |  |  |  |  |  |  |            |  |  |  |           |           |  |                                        |  |  |  |  |  |  |            |  |  |  |           |           |  |                                      |  |  |  |           |           |  |             |  |  |  |           |           |  |                                          |  |  |  |           |           |  |                                           |  |  |  |           |            |  |             |  |  |  |            |            |  |                                    |  |  |  |            |            |  |                                           |  |  |  |