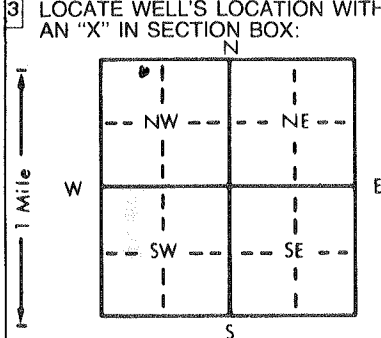


1 LOCATION OF WATER WELL: County: Cloud Fraction: NW 1/4 NW 1/4 NW 1/4 Section Number: 31 Township Number: T 5-<sup>DIR</sup> S Range Number: R 4 EW

Distance and direction from nearest town or city street address of well if located within city?  
3 E 1/5 Jamestown

2 WATER WELL OWNER: Maury CRUM RR#, St. Address, Box #: RR City, State, ZIP Code: Jamestown, KANSAS 66948  
 Board of Agriculture, Division of Water Resources Application Number:



4 DEPTH OF COMPLETED WELL: 130 ft. ELEVATION: ..... ft.  
 Depth(s) Groundwater Encountered 1. 82 ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL 80 ft. below land surface measured on mo/day/yr ..... ft.  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield 20-30 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Bore Hole Diameter 8 in. to ..... ft., and ..... in. to ..... ft.  
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well  
 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well  
 Was a chemical/bacteriological sample submitted to Department? Yes.....No X.....; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped .....  
 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 7 Fiberglass Threaded .....  
 Blank casing diameter 5 in. to 110 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 12 in., weight ..... lbs./ft. Wall thickness or gauge No. 1251  
 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) .....  
 12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped  Saw cut 11 None (open hole)  
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes  
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....  
 SCREEN-PERFORATED INTERVALS: From 110 ft. to 130 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 20 ft. to 130 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout  Bentonite 4 Other .....  
 Grout Intervals: From 0 ft. to 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)  
 13 Insecticide storage N/A  
 Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	topsoil			
3	28	clay brown			
28	78	calico clay			
78	82	grey clay			
82	130	sandrock			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6-12-96 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 361 This Water Well Record was completed on (mo/day/yr) 7-18-96 under the business name of Cox-Beswick FRR SERV. INC by (signature) Gene Beswick

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.