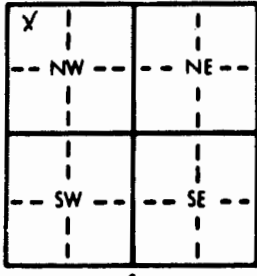


1 LOCATION OF WATER WELL: Fraction SW 1/4 NW 1/4 NW 1/4 Section Number 16 Township Number T 6 S Range Number R 27 EW
 County: Sheridan

Distance and direction from nearest town or city street address of well if located within city?
13 N 15 E Hoxie

2 WATER WELL OWNER: Gerald D Lewis
 RR#, St. Address, Box #: 817 15th Box 73 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Hoxie Mo 67740 Application Number:

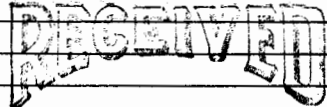
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:


4 DEPTH OF COMPLETED WELL: 3.5 ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. 1 ft. 2. 2.3 ft. 3. 2.3 ft.
 WELL'S STATIC WATER LEVEL 2.3 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 _____ in. to _____ ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well 12 Other (Specify below)
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; if yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No _____

5 TYPE OF BLANK CASING USED:
 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)
 Blank casing diameter 5 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 3.75 ft., weight _____ lbs./ft. Wall thickness or gauge No. _____
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) _____ 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) _____ 11 None (open hole)
 SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout intervals: From 4 ft. to 6 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)
 Direction from well? West How many feet? 150 FT

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
		<u>The Well Is Cased</u>			



FEB 07 1990

DIVISION OF ENVIRONMENT

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) _____ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) 1-2-90 under the business name of _____ by (signature) Gerald D Lewis

OFFICE USE ONLY T R E W SEC 1/4 1/4 1/4

MICROFILMED _____
INDEXED _____
CROSS-INDEXED _____

Sheridan County, Kans.
FILED FOR RECORD
This 10th day of Jan. 1990
at 4:00 o'clock P. M. in
Vol 222 Page 33
Kari Weis
Register of Deeds

CAPPING AGREEMENT FOR
WELL LOCATED SW NW NW 16-6-27, SHERIDAN COUNTY
BETWEEN NORTHWEST KANSAS GROUNDWATER MANAGEMENT DISTRICT #4
AND GERALD D. LEWIS

The above referenced Groundwater Management District and Landowner agree to the following provisions:

1. That the well located SW NW NW 16-6-27, Sheridan County is temporarily abandoned.
2. That the well has been inspected by personnel of GMD #4 and has been approved for capping.
3. That Gerald D. Lewis has properly capped the above referenced well as per GMD #4 policy VI-13 and will maintain the integrity of the well and cap to prevent the possible degradation of groundwater.
4. That the well will be periodically checked by personnel of GMD #4 to insure proper maintenance.
5. If any inspection finds the integrity of the well or cap to be compromised, Gerald D. Lewis will immediately plug the well to state and district standards.
6. That if the integrity of the well or cap is compromised by accident GMD #4 shall be immediately informed. Upon notification district personnel will inspect the well in order to determine if plugging is necessary.
7. That this agreement is to be promptly filed with the register of deeds in the above referenced county and shall be binding on Gerald D. Lewis and any or all successive landowners.

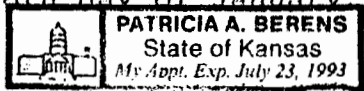
Dated this 8th day of January, 1990

Keith Reavis
Keith Reavis
Water Quality Coordinator
Northwest Kansas
Groundwater Mgt Dist #4

State of Kansas.
SS
County of Thomas

RECEIVED
FEB 07 1990
DIVISION OF ENVIRONMENT

The foregoing instrument was acknowledged before me this 8th day of January, 1990, by


PATRICIA A. BERENS
State of Kansas
My Appt. Exp. July 23, 1993

Patricia A. Berens
Notary

My commission expires July 23, 1993.

Gerald D. Lewis
Gerald D. Lewis
Norma Jean Lewis
Spouse

State of Kansas
County of Sheridan SS

The foregoing instrument was acknowledged before me this 10th day of January, 1990, by

Doreen Kennedy
Notary
My commission expires 1/9/93

SHERIDAN COUNTY, KANSAS
COUNTY CLERK
Doreen Kennedy