

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Osborne	SE ¼ NE ¼ NE ¼	19	T 7 S	R 12 EAW

Distance and direction from nearest town or city street address of well if located within city?

235 S. 1st Street, Osborne, Kansas

2 WATER WELL OWNER: **R & C Petroleum**

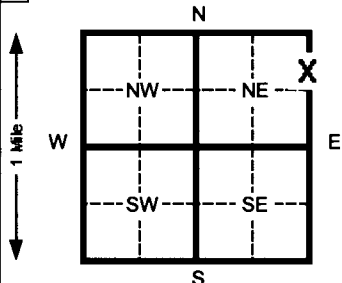
RR#, St. Address, Box #: **523 E. 4th Street**

Board of Agriculture, Division of Water Resources

City, State, ZIP Code: **North Platte, Nebraska 69103**

Application Number:

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



4 DEPTH OF COMPLETED WELL **32.5** ft. ELEVATION:

Depth(s) Groundwater Encountered 1 **26.5** ft. 2 _____ ft. 3 _____ ft.

WELL'S STATIC WATER LEVEL **26.74** ft. below land surface measured on mo/day/yr **05/26/04**

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield **NA** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter **8.5** in. to **32.5** ft. and _____ in. to _____ ft.

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 7 Lawn and garden (domestic) **10** Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____ If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes _____ No **X**

5 TYPE OF BLANK CASING USED:

- | | |
|--------------|------------|
| 1 Steel | 3 RMP (SR) |
| 2 PVC | 4 ABS |

- | | |
|-------------------|-------------------------|
| 5 Wrought iron | 8 Concrete tile |
| 6 Asbestos-Cement | 9 Other (specify below) |
| 7 Fiberglass | |

CASING JOINTS: Glued _____ Clamped _____
 Welded _____
 Threaded **X**

Blank casing diameter **2.375** in. to **17.5** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface **Flush Mount** in., weight _____ lbs./ft. Wall thickness or gauge No. **Schedule 40**

TYPE OF SCREEN OR PERFORATION MATERIAL:

- | | | | | |
|-------------------------------------|--------------------|------------------|--------------------|--------------------------|
| 1 Steel | 3 Stainless steel | 5 Fiberglass | 7 PVC | 10 Asbestos-cement |
| 2 Brass | 4 Galvanized steel | 6 Concrete tile | 8 RMP (SR) | 11 Other (specify) |
| | | | 9 ABS | 12 None used (open hole) |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | |
| 1 Continuous slot | 3 Mill slot | 5 Gauzed wrapped | 8 Saw cut | 11 None (open hole) |
| 2 Louvered shutter | 4 Key punched | 6 Wire wrapped | 9 Drilled holes | |
| | | 7 Torch cut | 10 Other (specify) | |

SCREEN-PERFORATED INTERVALS: From **32.5** ft. to **17.5** ft. From _____ ft. to _____ ft.

From _____ ft. to _____ ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **32.5** ft. to **15.0** ft. 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 **0.0** ft. to **1.5** ft. From **1.5** ft. to **15.0** ft. From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

- | | | | | |
|--------------------------|-----------------|-----------------|--------------------------|--------------------------|
| 1 Septic tank | 4 Lateral lines | 7 Pit privy | 10 Livestock pens | 14 Abandoned water well |
| 2 Sewer lines | 5 Cess pool | 8 Sewage lagoon | 11 Fuel storage | 15 Oil well/ Gas well |
| 3 Watertight sewer lines | 6 Seepage pit | 9 Feedyard | 12 Fertilizer storage | 16 Other (specify below) |
| | | | 13 Insecticide storage | |

Direction from well? **Northwest** How many feet? **100**

FROM	TO	CODE	LITHOLOGIC LOG
0.0	7.0		Dark brown slightly silty clay, firm-very firm, moist
7.0	12.0		Brown silty clay, some limestone fragments, friable-firm, moist-very moist
12.0	16.5		Gray brown silty clay, firm, moist
16.5	20.0		Gray silty clay, firm, moist, faint odor
20.0	22.0		Brown-dark brown silty clay, firm, moist, faint odor
22.0	25.0		Brown very silty clay, slightly gray, friable-firm, moist, slight odor
25.0	26.5		Brown clayey sand, slightly gravelly, moist-very moist, slight odor
26.5	31.0		Gray rust black fine-medium grained sand, well sorted, sub-rounded, wet, strong-moderate odor
31.0	31.5		Gray rust clayey silt, firm, slight odor
31.5	32.5		Black shale, caliche, hard, dry

Flush-mount well completion approved by Don Taylor, KDHE, BOW.

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/yr) **05/21/04** and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. **692** This Water Well Record was completed on (mo/day/yr) **05/20/04**

under the business name of **Quad State Services, Inc.** by (signature) _____

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1090 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