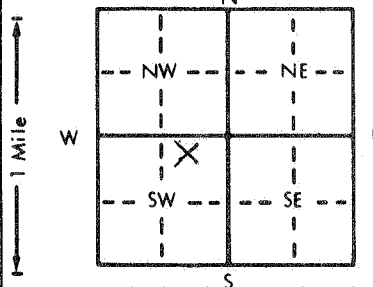


1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number  
 County: Sheridan NW 1/4 NE 1/4 SW 1/4 4 T 7 S R 26 E/W

Distance and direction from nearest town or city street address of well if located within city?  
5 1/2 N., 12 E. from Hoxie, Kansas

2 WATER WELL OWNER: Ray Schamberger Castle Resources, Inc.  
 RR#, St. Address, Box #: Rt. 1 1200 E. 27 Suite C Board of Agriculture, Division of Water Resource  
 City, State, ZIP Code: Hoxie, Ks. 67740 Hays, Ks. 67601-2120 Application Number: 920206

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 4 DEPTH OF COMPLETED WELL: 182' ft. ELEVATION: ..... ft.  
 Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL ..... 133 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 ..... 8 in. to ..... 182 ft., and ..... in. to ..... ft.  
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well  
 1 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 No X

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped .....  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 2 PVC 4 ABS 7 Fiberglass Threaded.....  
 Blank casing diameter ..... 4.5 in. to 162 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface ..... 18 in., weight 2.38 lbs./ft. Wall thickness or gauge No. .248  
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) .....  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 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 ..... 162 ft. to 182 ft., From ..... ft. to ..... ft.  
 From ..... 20 ft. to 182 ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: 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 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  
 Direction from well? Northeast How many feet? 330' NE

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Surface	154	159	Clay with fine sand streaks
3	16	Silty Clay	159	167	Fine Sand with clay streaks
16	19	Hard Clay	167	174	Clay with Sand Streaks
19	27	Med. Sand	174	178	Med. Sand
27	31	Clay	178	182	Ochre
31	39	Fine Sand			
39	55	Clay			
55	72	Caliche & Clay Streaks			
72	81	Caliche & Fine Sand Streaks			
81	92	Sandstone & Clay Streaks			
92	97	Fine Sand			
97	103	Caliche & Cemented Sand			
103	139	Med. to coarse sand & gravel			
139	145	Med. tight sand			
145	154	Sand & Clay streaks			

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) ..... 7-6-92 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 ..... This Water Well Record was completed on (mo/day/yr) ..... 7-8-92 ..... under the business name of WOOFER PUMP & WELL, INC. by (signature) Jay Woofler

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.