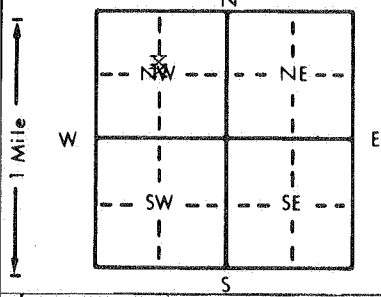


1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number  
 County: Sheridan M C-NW 1/4 1/4 1/4 25 T 7 S R 30 EW

Distance and direction from nearest town or city street address of well if located within city?  
11 West 1 N. of Hoxie, Kansas

2 WATER WELL OWNER: Earl Moss  
 RR#, St. Address, Box # : Rr Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Hoxie, Ks. 67740 Application Number: 39275

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



4 DEPTH OF COMPLETED WELL... 245' ft. ELEVATION: .....

Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL ... 155' ft. below land surface measured on mo/day/yr 7-10-89  
 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... 28 in. to 2.45 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 16 in. to 16.5 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface. .... 18 in., weight ..... 15.54 lbs./ft. Wall thickness or gauge No. 500

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 165 ft. to 245 ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 20 ft. to 245 ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
 Grout Intervals: From 20 ft. to 245 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 Old irrigation well  
 Direction from well? NW How many feet? 3960

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Surface	226	227	Caliche
3	74	Clay	227	240	Med. Sand
74	92	Sand	240	242	Ochre
92	97	Clay	242	245	Shale
97	103	Sand & Cemented sand (fine)			
103	155	Sand, Caliche, Clay			
155	160	Caliche & Sand Streaks			
160	163	Fine sand & Caliche			
163	166	Clay			
166	193	Caliche (hard) sand strks.			
193	215	Med. sand (couple clay strks)			
215	221	Clay & Med. Sand			
221	222	Med. Sand			
222	223	Caliche			
223	226	Med. Sand			

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) 7-10-89 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 394 This Water Well Record was completed on (mo/day/yr) 7-14-89 under the business name of Woofter Pump & Well Service by (signature) Walter Woofter

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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.