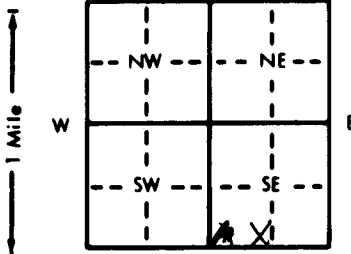


<b>1 LOCATION OF WATER WELL:</b> County: <u>Thomas</u>		Fraction <u>SE 1/4 SW 1/4 SE 1/4</u>		Section Number <u>19</u>	Township Number <u>T 7 S</u>	Range Number <u>R 31 EW</u>																																											
Distance and direction from nearest town or city street address of well if located within city?																																																	
<b>2 WATER WELL OWNER:</b> <u>Norris G. and Lois W. Mallory</u> RR#, St. Address, Box #: <u>Rd Box 125</u> City, State, ZIP Code: <u>Colby KS 67701</u> Board of Agriculture, Division of Water Resources Application Number:																																																	
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;"></div>		<b>4 DEPTH OF COMPLETED WELL:</b> <u>108</u> ft. ELEVATION: Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft. WELL'S STATIC WATER LEVEL <u>105</u> ft. below land surface measured on mo/day/yr <u>2-26-90</u> 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: <table border="0" style="width:100%;"><tr><td><input checked="" type="checkbox"/> 1 Domestic</td><td><input type="checkbox"/> 3 Feedlot</td><td><input type="checkbox"/> 6 Oil field water supply</td><td><input type="checkbox"/> 9 Dewatering</td><td><input type="checkbox"/> 12 Other (Specify below)</td></tr><tr><td><input type="checkbox"/> 2 Irrigation</td><td><input type="checkbox"/> 4 Industrial</td><td><input type="checkbox"/> 7 Lawn and garden only</td><td><input type="checkbox"/> 10 Monitoring well</td><td></td></tr></table> Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes.....No.....					<input checked="" type="checkbox"/> 1 Domestic	<input type="checkbox"/> 3 Feedlot	<input type="checkbox"/> 6 Oil field water supply	<input type="checkbox"/> 9 Dewatering	<input type="checkbox"/> 12 Other (Specify below)	<input type="checkbox"/> 2 Irrigation	<input type="checkbox"/> 4 Industrial	<input type="checkbox"/> 7 Lawn and garden only	<input type="checkbox"/> 10 Monitoring well																																		
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<b>5 TYPE OF BLANK CASING USED:</b> <table border="0" style="width:100%;"><tr><td><input checked="" type="checkbox"/> 1 Steel</td><td><input type="checkbox"/> 3 RMP (SR)</td><td><input type="checkbox"/> 5 Wrought iron</td><td><input type="checkbox"/> 8 Concrete tile</td><td colspan="2">CASING JOINTS: Glued.....Clamped.....</td></tr><tr><td><input type="checkbox"/> 2 PVC</td><td><input type="checkbox"/> 4 ABS</td><td><input type="checkbox"/> 6 Asbestos-Cement</td><td><input type="checkbox"/> 9 Other (specify below)</td><td colspan="2">Welded.....</td></tr><tr><td colspan="4"></td><td colspan="2">Threaded.....</td></tr></table> Blank casing diameter <u>5</u> in. to .... ft., Dia. .... in. to .... ft., Dia. .... in. to .... ft. Casing height above land surface. <u>4</u> Below .... in., weight .... lbs./ft. Wall thickness or gauge No. .... TYPE OF SCREEN OR PERFORATION MATERIAL: <table border="0" style="width:100%;"><tr><td><input type="checkbox"/> 1 Steel</td><td><input type="checkbox"/> 3 Stainless steel</td><td><input type="checkbox"/> 5 Fiberglass</td><td><input type="checkbox"/> 8 RMP (SR)</td><td><input type="checkbox"/> 11 Other (specify)</td></tr><tr><td><input type="checkbox"/> 2 Brass</td><td><input type="checkbox"/> 4 Galvanized steel</td><td><input type="checkbox"/> 6 Concrete tile</td><td><input type="checkbox"/> 9 ABS</td><td><input type="checkbox"/> 12 None used (open hole)</td></tr></table> SCREEN OR PERFORATION OPENINGS ARE: <table border="0" style="width:100%;"><tr><td><input type="checkbox"/> 1 Continuous slot</td><td><input type="checkbox"/> 3 Mill slot</td><td><input type="checkbox"/> 5 Gauzed wrapped</td><td><input type="checkbox"/> 8 Saw cut</td><td><input type="checkbox"/> 11 None (open hole)</td></tr><tr><td><input type="checkbox"/> 2 Louvered shutter</td><td><input type="checkbox"/> 4 Key punched</td><td><input type="checkbox"/> 6 Wire wrapped</td><td><input type="checkbox"/> 9 Drilled holes</td><td></td></tr><tr><td colspan="2"></td><td><input type="checkbox"/> 7 Torch cut</td><td><input type="checkbox"/> 10 Other (specify)</td><td></td></tr></table> SCREEN-PERFORATED INTERVALS: From .... ft. to .... ft., From .... ft. to .... ft. GRAVEL PACK INTERVALS: From .... ft. to .... ft., From .... ft. to .... ft.							<input checked="" type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 RMP (SR)	<input type="checkbox"/> 5 Wrought iron	<input type="checkbox"/> 8 Concrete tile	CASING JOINTS: Glued.....Clamped.....		<input type="checkbox"/> 2 PVC	<input type="checkbox"/> 4 ABS	<input type="checkbox"/> 6 Asbestos-Cement	<input type="checkbox"/> 9 Other (specify below)	Welded.....						Threaded.....		<input type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 Stainless steel	<input type="checkbox"/> 5 Fiberglass	<input type="checkbox"/> 8 RMP (SR)	<input type="checkbox"/> 11 Other (specify)	<input type="checkbox"/> 2 Brass	<input type="checkbox"/> 4 Galvanized steel	<input type="checkbox"/> 6 Concrete tile	<input type="checkbox"/> 9 ABS	<input type="checkbox"/> 12 None used (open hole)	<input type="checkbox"/> 1 Continuous slot	<input type="checkbox"/> 3 Mill slot	<input type="checkbox"/> 5 Gauzed wrapped	<input type="checkbox"/> 8 Saw cut	<input type="checkbox"/> 11 None (open hole)	<input type="checkbox"/> 2 Louvered shutter	<input type="checkbox"/> 4 Key punched	<input type="checkbox"/> 6 Wire wrapped	<input type="checkbox"/> 9 Drilled holes				<input type="checkbox"/> 7 Torch cut	<input type="checkbox"/> 10 Other (specify)	
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<b>6 GROUT MATERIAL:</b> <input type="checkbox"/> 1 Neat cement <input checked="" type="checkbox"/> 2 Cement grout <input type="checkbox"/> 3 Bentonite <input type="checkbox"/> 4 Other ..... Grout Intervals: From <u>10</u> ft. to <u>4</u> ft., From .... ft. to .... ft., From .... ft. to .... ft. What is the nearest source of possible contamination: <table border="0" style="width:100%;"><tr><td><input type="checkbox"/> 1 Septic tank</td><td><input type="checkbox"/> 4 Lateral lines</td><td><input type="checkbox"/> 7 Pit privy</td><td><input type="checkbox"/> 10 Livestock pens</td><td><input type="checkbox"/> 14 Abandoned water well</td></tr><tr><td><input type="checkbox"/> 2 Sewer lines</td><td><input type="checkbox"/> 5 Cess pool</td><td><input type="checkbox"/> 8 Sewage lagoon</td><td><input type="checkbox"/> 11 Fuel storage</td><td><input type="checkbox"/> 15 Oil well/Gas well</td></tr><tr><td><input type="checkbox"/> 3 Watertight sewer lines</td><td><input type="checkbox"/> 6 Seepage pit</td><td><input type="checkbox"/> 9 Feedyard</td><td><input type="checkbox"/> 12 Fertilizer storage</td><td><input type="checkbox"/> 16 Other (specify below)</td></tr><tr><td colspan="3"></td><td><input type="checkbox"/> 13 Insecticide storage</td><td></td></tr></table> Direction from well? How many feet?							<input type="checkbox"/> 1 Septic tank	<input type="checkbox"/> 4 Lateral lines	<input type="checkbox"/> 7 Pit privy	<input type="checkbox"/> 10 Livestock pens	<input type="checkbox"/> 14 Abandoned water well	<input type="checkbox"/> 2 Sewer lines	<input type="checkbox"/> 5 Cess pool	<input type="checkbox"/> 8 Sewage lagoon	<input type="checkbox"/> 11 Fuel storage	<input type="checkbox"/> 15 Oil well/Gas well	<input type="checkbox"/> 3 Watertight sewer lines	<input type="checkbox"/> 6 Seepage pit	<input type="checkbox"/> 9 Feedyard	<input type="checkbox"/> 12 Fertilizer storage	<input type="checkbox"/> 16 Other (specify below)				<input type="checkbox"/> 13 Insecticide storage																								
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FROM TO		LITHOLOGIC LOG		FROM TO	PLUGGING INTERVALS																																												
				<u>108</u>	<u>93</u>	<u>washed sand</u>																																											
				<u>93</u>	<u>10</u>	<u>clay</u>																																											
				<u>10</u>	<u>4</u>	<u>Cement Grout</u>																																											
				<u>4</u>	<u>0</u>	<u>Compacted Clay &amp; Topsoil</u>																																											
<div style="border: 2px solid black; padding: 10px; display: inline-block; transform: rotate(-5deg); font-weight: bold; font-size: 1.5em;">RECEIVED</div> <div style="margin-top: 10px;">MAR 05 1990</div> <div style="margin-top: 10px;">DIVISION OF ENVIRONMENT</div>																																																	
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>2-26-90</u> 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) <u>2-27-90</u> under the business name of ..... by (signature) <u>Don Brown</u>																																																	

OFFICE USE ONLY

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