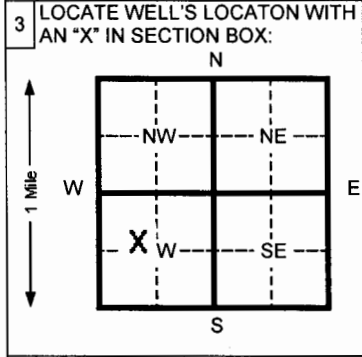


1 LOCATION OF WATER WELL: Fraction **SE ¼ NW ¼ SW ¼** Section Number **20** Township Number **T 8 S** Range Number **R 10 E/W**  
 County: **Mitchell**

Distance and direction from nearest town or city street address of well if located within city?  
**Washington & Pitt Streets, Tipton, KS. Latitude N 39.33954° Longitude W 98.46658°**

2 WATER WELL OWNER: **United Agri Products, Inc.**  
 RR#, St. Address, Box # : **7251 West 4<sup>th</sup> Street** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : **Greeley, CO 80634** Application Number: **Not Applicable**



4 DEPTH OF COMPLETED WELL **39.5** ft. ELEVATION: **Unknown**  
 Depth(s) Groundwater Encountered 1 **29.5** ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL **Unk.** 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 **39.5** 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 **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 \_\_\_\_\_ Clamped \_\_\_\_\_  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded \_\_\_\_\_  
**2** PVC 4 ABS 7 Fiberglass **Threaded**  
 Blank casing diameter **2** in. to **24.1** ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface **approx. 40** in., weight **0.682** lbs./ft. Wall thickness or gauge No. **0.1875 in.**  
 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 **24.1** ft. to **39.5** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 GRAVEL PACK INTERVALS: From **22.1** ft. to **39.5** 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** ft. to **22.1** 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? **southwest** How many feet? **approximately 10 feet**

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5	17	Sand and gravel (fill)			
0.5	18	01	Brown, fat clay			
18	23	02	Brown silt			
23	28	01	Brown, fat clay			
28	34	01	Clay			
34	35	09	Coarse, well rounded sand			
35	39.5	01	Brown, fat clay, trace sand			
39.5	39.5	28	Competent bedrock			

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) **12/14/07** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **616** This Water Well Record was completed on (mo/day/yr) **1/9/08** under the business name of **Thiele Geotech, Inc.** by (signature) *D. J. [Signature]*

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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.

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