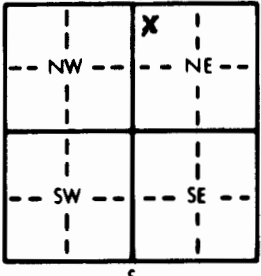


LOCATION OF WATER WELL: Fraction NW 1/4 NE 1/4 NE 1/4 Section Number 2 Township Number T 8 S Range Number R 25 EW

County: Graham
 Distance and direction from nearest town or city street address of well if located within city?
1/4 mile West Highway 24 Morland Junction then 2 miles North

WATER WELL OWNER: City of Morland
 RR#, St. Address, Box #: City of Morland, Kansas 67650
 City, State, ZIP Code: Morland, Kansas 67650
 Board of Agriculture, Division of Water Resources
 Application Number: N/A

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: DEPTH OF COMPLETED WELL: 140 ft. ELEVATION: 2485
 Depth(s) Groundwater Encountered 1. --- ft. 2. --- ft. 3. --- ft.



WELL'S STATIC WATER LEVEL --- 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 --- in. to --- 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 Observation well TEST HOLE
 Was a chemical/bacteriological sample submitted to Department? Yes --- No ---; If yes, mo/day/yr sample was submitted ---
 Water Well Disinfected? Yes --- No ---

TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued --- Clamped ---
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded ---
 7 Fiberglass --- Threaded ---
 Blank casing diameter --- in. to --- ft., Dia --- in. to --- ft., Dia --- in. to --- ft.
 Casing height above land surface --- in., weight --- lbs./ft. Wall thickness or gauge No. ---

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 --- ft. to --- ft., From --- ft. to --- ft.
 From --- ft. to --- ft., From --- ft. to --- ft.
 GRAVEL PACK INTERVALS: From --- ft. to --- ft., From --- ft. to --- ft.
 From --- ft. to --- ft., From --- ft. to --- ft.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other ---
 Grout Intervals: From 3 ft. to 140 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 none

Direction from well? --- How many feet? ---

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	16	Clay	124	129	Ochre
16	20	Sand - med. gravel - red	129	140	Blue Shale
20	34	Limestone - clay			
34	36	Hard limestone			
36	46	White clay - loose limestone			
46	51	Good sandstone			
51	54	Sandstone - clay mix	3	140	<i>Plugging Record</i> <i>cement grout</i>
54	60	Limestone - med. large gravel - fair			
60	66	Sand - small gravel - loose			
66	76	Brown clay - sand - poor			
76	83	Same			
83	88	Limeclay - sand - poor			
88	108	Green loose clay - poor			
108	117	Sand - small gravel - clay - mix - fair			
117	124	Med. gravel - sand mix - fair			

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) 9-9-87 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) 9-9-87 under the business name of City of Morland by (signature) [Signature]

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: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

T

R

EW

SEC.

1/4

1/4

1/4