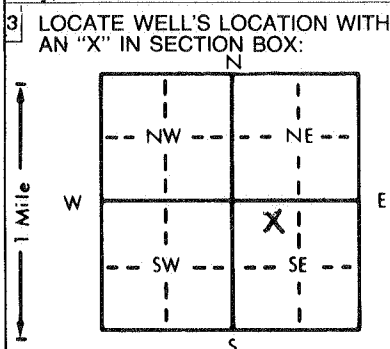


1 LOCATION OF WATER WELL: County: Sheridan Fraction: C N 1/2 NW 1/4 SE 1/4 Section Number: 32 Township Number: T 8 S Range Number: R 27 E/W

Distance and direction from nearest town or city street address of well if located within city?
4 East 3 1/2 south & 1/2 east of Hoxie, Ks.

2 WATER WELL OWNER: W.D. Welling Emphasis Oil Co.
 RR#, St. Address, Box #: 401 Ash Box 506
 City, State, ZIP Code: Hays, Ks. 67601 Russell, Ks. 67655 Board of Agriculture, Division of Water Resources
 Application Number: 910448



4 DEPTH OF COMPLETED WELL: 66 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 28 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 _____ 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:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass _____ Threaded _____
 Blank casing diameter: 4.5 in. to 46 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 24 in., weight 2.38 lbs./ft. Wall thickness or gauge No. 248
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 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 46 ft. to 66 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 20 ft. to 66 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 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? NE How many feet? 125

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Surface			
1	8	Clay			
8	11	Sand			
11	18	Clay			
18	21	Sand			
21	35	Cemented sand			
35	37	Sand			
37	52	Sandy clay			
52	60	Loose sand			
60	64	Ochre			
64	66	Shale			

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) 9-25-91 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) 10-1-91 under the business name of WOOFER PUMP & WELL by (signature) Walter 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.