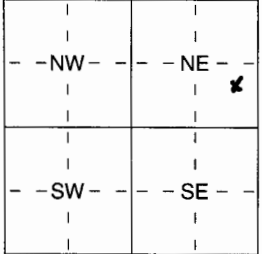


1 LOCATION OF WATER WELL: Fraction		Section Number		Township Number		Range Number					
County: <u>Sherman</u> <u>N 1/4 NE 1/4 SE 1/4 NE 1/4</u>		<u>29</u>		T <u>8</u> S		R <u>39</u> E/W <u>0</u>					
Distance and direction from nearest town or city street address of well if located within city? <u>1802 Sandy Drive Goodland, KS</u>											
2 WATER WELL OWNER: <u>STAGE STOP VENTURES</u> RR#, St. Address, Box #: <u>PO Box 575</u> City, State, ZIP Code: <u>Goodland, KS 67735</u> Board of Agriculture, Division of Water Resources Application Number: <u>70C 3664.30</u>											
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>215</u> ft. ELEVATION: <u>70C 3664.30</u>									
		Depth(s) Groundwater Encountered 1 ..... ft. 2 ..... ft. 3 ..... ft. WELL'S STATIC WATER LEVEL <u>186.08</u> 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 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 Domestic (lawn & garden) <u>10 Monitoring well MW-1</u>									
Was a chemical/bacteriological sample submitted to Department? Yes ..... No <u>X</u> ..... If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes ..... No											
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped ..... <u>2 PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded ..... Blank casing diameter <u>0</u> in. to <u>18.5</u> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft. Casing height above land surface <u>0</u> in., weight ..... lbs./ft. Wall thickness or gauge No. <u>46</u> TYPE OF SCREEN OR PERFORATION MATERIAL: <u>7 PVC</u> 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: 1 Continuous slot <u>3 Mill slot</u> 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) ..... ft. SCREEN-PERFORATED INTERVALS: From <u>185</u> ft. to <u>215</u> ft., From ..... ft. to ..... ft. GRAVEL PACK INTERVALS: From <u>180</u> ft. to <u>215</u> ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.											
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other ..... Grout Intervals: From <u>0</u> ft. to <u>180</u> 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 <u>11 Fuel storage</u> 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) ..... Direction from well? ..... How many feet? .....											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
<u>0</u>		<u>40</u>		<u>Silt w/ trace sand</u>							
<u>40</u>		<u>50</u>		<u>Silty clay w/ trace caliche</u>							
<u>50</u>		<u>110</u>		<u>Sand w/ gravel &amp; trace caliche</u>							
<u>110</u>		<u>140</u>		<u>Sand w/ clay &amp; caliche</u>							
<u>140</u>		<u>170</u>		<u>Sand w/ gravel &amp; silty clay</u>							
<u>170</u>		<u>215</u>		<u>Sandy clay w/ sand-mudstone</u>							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>3/29/05</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. <u>554</u> This Water Well Record was completed on (mo/day/yr) <u>4/29/05</u> under the business name of <u>Woofor Pump &amp; Well</u> by (signature) <u>[Signature]</u>											
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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.											