

1 LOCATION OF WATER WELL: Fraction SE 1/4 SE 1/4 SE 1/4 Section Number 7 Township Number T 8 S Range Number R 4 E  
 County: Cloud

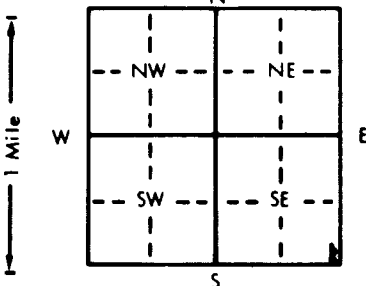
Distance and direction from nearest town or city street address of well if located within city?

NEAR CITY OF GLASCO KS

2 WATER WELL OWNER: Natural Gas Pipeline Co. Well No. 5  
 RR#, St. Address, Box # : Glasco Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Kansas Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF COMPLETED WELL: 151 ft. ELEVATION: 1385



Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL 54 ft. below land surface measured on mo/day/yr 7/20/90  
 Pump test data: Well water was 69 ft. after 4 hours pumping 53 gpm  
 Est. Yield .... gpm: Well water was .... ft. after .... hours pumping .... gpm  
 Bore Hole Diameter 24 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 ; If yes, mo/day/yr sample was sub-  
 mitted Water Well Disinfected? Yes  No

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 8 in. to 130 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 36" in., weight ..... lbs./ft. Wall thickness or gauge No. ....

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 130 ft. to 150 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 25 ft. to 151 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 25 ft. to 5 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well  
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage N.G.P. FACILITY

Direction from well? N How many feet? 500'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	top soil	108	111	gray & tan clay w/sandstone layers
2	4	brown clay	111	149	sandstone w/gray clay layers
4	7	rusty brown clay	149	151	gray clay
7	10	gray rusty clay			
10	24	gray clay w/rusty sandstone			
24	29	rusty red & purple sandstone			
29	43	gray clay/rusty red & brn sandstone			
43	52	gray clay			
52	58	red & gray clay			
58	60	red clay w/sandstone layers			
60	65	gray clay			
65	67	brown clay			
67	97	dark gray clay			
97	106	sandstone w/gray clay layers			
106	108	gray clay w/very fine sand			

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) 7/20/90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 102 W This Water Well Record was completed on (mo/day/yr) 8/21/90 under the business name of Layne-Western Co., Inc., Wichita, Ks. 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: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

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