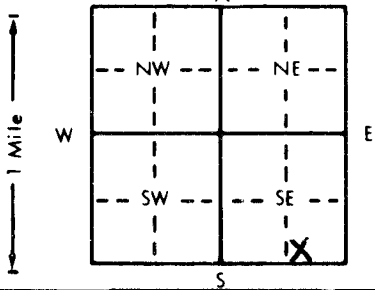


1 LOCATION OF WATER WELL: County: Sherman Fraction: SW 1/4 SE 1/4 SE 1/4 Section Number: 24 Township Number: T 8 S Range Number: R 40 E W

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

2 WATER WELL OWNER: Goodland Coop Equity Exchange
 RR#, St. Address, Box #: West Hwy 24 City, State, ZIP Code: Goodland, KS
 Board of Agriculture, Division of Water Resources
 Application Number: MW-5

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



4 DEPTH OF COMPLETED WELL: 202 ft. ELEVATION: _____ ft.
 Depth(s) Groundwater Encountered: 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 183.68 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:
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well 12 Other (Specify below)
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; 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 _____
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
 7 Fiberglass Threaded
 Blank casing diameter: 4 in. to 172 ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.
 Casing height above land surface: 0 in., weight _____ lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____
 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 172 ft. to 202 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 170 ft. to 202 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 1.5 ft., From 1.5 ft. to 168 ft., From 168 ft. to 170 ft.

What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 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
0	0.3	Topsoil			
0.3	10	Silt, some clay med. yellowish brown			
10	15	Silt, med. yellowish brown			
15	35	Silt some clay yellowish brown			
35	48	clay, dark yellowish brown			
48	58	clay, some fine sand, grayish orange			
58	78	Sand, med-loose grading to fine-med.			
78	88	Sand, some clay, pale yellowish brown			
88	99	Sand, fine, some calciche, pale ylt. brown			
99	119	Sand, fine, lt. brown			
119	129	Sand, fine, some green clay, lt brown			
129	135	gravel			
135	179	Sand, fine light brown			
179	210	Sand, clay matrix, lt brown			

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) 2/14/94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 438 This Water Well Record was completed on (mo/day/yr) 5/29/99 under the business name of Kansas City Testing Lab, Inc. 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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.