|  |                | W   | ATER WELL RE         | CORD For              | m WWC-5                 | KSA 82a-                                   | 1212 ID N             | NO            |  |                          |                     |               |
|--|----------------|---|----------------------|-----------------------|-------------------------|--|-----------------------|---------------|--|--------------------------|---------------------|---------------|
|  |                | TER WELL:   | Fraction             |                       |                         |  | ction Number          |               | Township Nu  | mber                     | Range N             | lumber        |
| County:  | Sedge          | ICK   | SW V                 | 4 5W 1/4              | NWV                     |  | 8                     |               | 127  | s                        | R 2                 | ĒW            |
| Distance a   | and direction  | from nearest to                                     | wn or city street    | address of well       | Il if located v         | vithin city?                               | C1+4 4                | of            | Wichi  | tq                       |                     |               |
|  |                |   | K Pler               |                       |                         |  |                       |               |  |                          |                     |               |
|  |                |   |                      |                       | ř                       |  |                       |               |  |                          |                     | - Decourses   |
| City. State  | . ZIP Code     | # 8101<br>Wichil                                    | E Brid               | 1Emeller              |                         |  |                       |               | Application N  |                          | ivision of Wate     | r Resources   |
| 3 LOCATE   |                |   | 4 DEPTH OF           | COMPLETED             | WELL                    | 80   | ft. ELEVA             | TION:         | , pproduction .  |                          |                     |               |
| 3 LOCATE WELL'S LOCATION WITH 4 DEPTH OF COMPLETED WELL 80 ft. ELEVATION:   AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1 6.8 ft. 2 ft. 3  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
|  | Ņ              |   | WELL'S STAT          | IC WATER LEV          | /EL <i>I.,</i>          | ft. bel                                    | ow land surfac        | ce mea        | sured on mo/o  | day/yr                   |                     |               |
| Pump test data: Well water was ft. after hours pumping   |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
| NW NE   Est. Yield gpm: Well water was ft. after hours pumping   |                |   |                      |                       |                         |  |                       |               |  |                          |                     | gpm           |
| 1 Domestic 3 Feedlot 6_Oil field water supply 9 Dewatering 12 Other (Specify below)  |                |   |                      |                       |                         |  |                       |               |  |                          |                     | elow)         |
| W I E 2 Irrigation 4 Industrial ODomestic (lawn & garden) 10 Monitoring well   |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
|  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
| SW SE Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs sample was sub-  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
| l mitted Water Well Disinfected? Yes ★ No  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
|  | <u> </u>       | I   |                      |                       |                         |  |                       |               |  |                          |                     |               |
| 5 TYPE   | OF BLANK       | CASING USED:  |                      | 5 Wrought i           | ron                     | 8 Concr                                    | ete tile              |               | CASING JOIN  | TS: Glueo                | dX Clam             | ped           |
| 1. Stee  |                | 3 RMP (S  | R)                   | 6 Asbestos-           | Cement                  |  | (specify below        | v)            |  | Weld                     | ed                  |               |
| 2 PVC  |                | 4 ABS   |                      | 7 Fiberglass          |                         |  |                       |               |  |                          | aded                |               |
| Blank casi   | ng diameter    | <b>..</b>   | in. to               | 4.5                   | . ft., Dia              | D J  | in. to                |               | ft., Dia.  |                          | in. to              | ft.           |
|  |                | nd surface<br>R PERFORATIC                          | 18                   | in., weigh            | nt <b>&gt;</b> <i>V</i> |  |                       | . Ibs./ft.    |  |                          |                     |               |
| 1 Stee   |                | 3 Stainles  |                      | 5 Fiberglass          | 5                       | 7 PV                                       | 71P (SR)              |               |  | stos-Cem                 | ent                 |               |
| 2 Bras   |                | 4 Galvania  |                      | 6 Concrete            |                         | 9 AE                                       | IS S                  |               |  | used (op                 |                     |               |
| SCREEN   |                | RATION OPENII                                       | NGS ARE:             |                       | 5 Guaze                 | d wrapped                                  |                       | 8.5           | Saw cut  |                          | 11 None (ope        | n hole)       |
|  |                |   |                      |                       |                         |  |                       | Drilled holes |  |                          |                     |               |
| 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
| SCREEN-PERFORATED INTERVALS: From  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
|  |                |   |                      | 5                     |                         |  |                       |               |  |                          |                     |               |
|  | GRAVEL PA      | CK INTERVALS  | From                 | 2,3                   | ft. to . 444.0          | Ø  | ft., ⊢rom<br>ft From  | )<br>\        |  | ft. to                   | •••••               | tt.<br>ft     |
|  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
|  | JT MATERIA     |   | it cement            | 2 Cement              |                         | (3)Ben                                     | tonite                | 4 Othe        | ər   |                          |                     |               |
|  |                |   | ft. to <b>2</b>      |                       | om                      | ft. 1                                      | ю                     | ft            | ., From  |                          |                     |               |
|  |                | •   | contamination:       |                       |                         |  | 10 Lives              |               |  |                          | bandoned wate       |               |
| 1 Septic tank 4 Lateral I  |                |   |                      |                       |                         |  |                       |               | 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<br>Direction from well? SE  |                |   |                      |                       | 9 Feedyard              | d 13 Insecticide storage<br>How many feet? |                       |               | , The second sec |                          |                     |               |
| FROM   |                |   | LITHOLOGI            | C L OG                |                         | FROM                                       | TO TO                 | ny teet       |  |                          | TERVALS             |               |
|  |                | <b>T</b> 0 C  |                      |                       |                         |  |                       |               | PLUC   |                          | TERVALS             |               |
|  |                | 45au  | OIL                  |                       |                         |  |                       |               |  |                          |                     |               |
| 11   | 17             |   | ay .                 |                       |                         |  |                       |               |  |                          |                     |               |
| 722  | 68             | Soft /  | ine / sh             | ale Stre              | allord                  |  |                       |               | · · · · · · · · · · · · · · · · · · ·  |                          |                     |               |
| 19   | 80             | bland   | Shale                | The SIFE              | ukers                   |  |                       |               |  |                          |                     |               |
|  |                | FIGUR -   | 211416               |                       |                         |  |                       |               |  |                          |                     |               |
|  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
|  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
|  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
|  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
|  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
|  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
|  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
|  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
| 7 CONTR  | ACTOR'S C      |   |                      | ATION this wa         | ater well was           | d donetri                                  | ucted (2) reco        | onstruc       | ted, or (3) plu  | aged und                 | er my jurisdicti    | on and was    |
| completed  | on (mo/dav/v   | ear)  | 3-01                 |                       |                         | C  | and this re           | ecord is      | true to the bes  | st of mv kn              | owledge and be      | elief. Kansas |
| completed on (mo/day/year)   |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
| under the business name of Water Well Services by (signature)  |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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 |                |   |                      |                       |                         |  |                       |               |  |                          |                     |               |
| and Enviro   | onment, Bureau | of Water, Geology Se<br>ach <u>constructed</u> well | ection, 1000 SW Jack | son St., Suite 420, T | lopeka, Kansas          | 66612-1367. Te                             | lephone 785-296-5     | 5522. Sei     | nd one to WATER V  | WELL OWNE                | R and retain one fo | r your        |
| L 1000iua. P   |                |   | •                    |                       |                         |  |                       |               |  |                          |                     |               |