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| 1 LOCATION OF WATER WELL:<br>County: <u>Sedgwick</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Fraction <u>NE<sup>1</sup>/<sub>4</sub> NE<sup>1</sup>/<sub>4</sub> NE<sup>1</sup>/<sub>4</sub></u> | Section Number <u>36</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Township Number <u>T 28 S</u> | Range Number <u>R 1E</u> E/W |                    |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>2516 N. Woodlawn</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |                              |                    |
| 2 WATER WELL OWNER: <u>Dwight Williams</u><br>RR#, St. Address, Box # : <u>2516 N. Woodlawn</u><br>City, State, ZIP Code : <u>Derby KS</u><br>Board of Agriculture, Division of Water Resources<br>Application Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |                              |                    |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                     | 4 DEPTH OF COMPLETED WELL <u>90</u> ft. ELEVATION:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                               |                              |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                     | Depth(s) Groundwater Encountered <u>23</u> ft. 2 ..... ft. 3 ..... ft.<br>WELL'S STATIC WATER LEVEL <u>23</u> ft. below land surface measured on mo/day/yr .....<br>Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm<br>Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm<br>WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well<br>1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)<br>2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well ..... |                               |                              |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                     | 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 <u>X</u> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                               |                              |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |                              |                    |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |                              |                    |
| 1 Steel <u>2 PVC</u> 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Glued <u>X</u> Clamped .....<br>Blank casing diameter <u>5</u> in. to <u>90</u> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.<br>Casing height above land surface <u>16</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No. <u>26</u><br>TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 8 RMP (SR) 10 Asbestos-Cement 11 Other (Specify) .....<br>2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 12 None used (open hole)<br>SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Mill slot 3 Mill slot 4 Key punched 5 Guazed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 11 None (open hole)<br>2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) ..... ft. |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |                              |                    |
| SCREEN-PERFORATED INTERVALS: From <u>40</u> ft. to <u>90</u> ft., From ..... ft. to ..... ft.<br>GRAVEL PACK INTERVALS: From <u>24</u> ft. to <u>90</u> ft., From ..... ft. to ..... ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |                              |                    |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....<br>Grout Intervals: From <u>4</u> ft. to <u>24</u> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.<br>What is the nearest source of possible contamination:<br>1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well<br>2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well<br><u>3 Watertight sewer line</u> 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)<br>Direction from well? <u>West</u> How many feet? <u>87</u>                                                                                                                                                                                                                                                                                                           |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |                              |                    |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | TO                                                                                                  | LITHOLOGIC LOG                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | FROM                          | TO                           | PLUGGING INTERVALS |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 2                                                                                                   | topsoil                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                               |                              |                    |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 32                                                                                                  | tan clay                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                               |                              |                    |
| 32                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 41                                                                                                  | med sand                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                               |                              |                    |
| 41                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 55                                                                                                  | sand stone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                               |                              |                    |
| 55                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 70                                                                                                  | yellow shale                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                               |                              |                    |
| 70                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 90                                                                                                  | blue shale limestone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                               |                              |                    |
| 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) <u>7-10-02</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No <u>6611</u> This Water Well Record was completed on (mo/day/yr) <u>7-29-05</u> under the business name of <u>Chase Drilling</u> by (signature) <u>R Chase</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.                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                               |                              |                    |