

|                                                                                                                                                                                                                                                                                                                                                                            |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|------------------------------------------------------------------------------------------------|----------------|----|------------------------------------------------------------|---------------------------------------------------------------------------|--|--|--|--|
| <b>1 LOCATION OF WATER WELL:</b>                                                                                                                                                                                                                                                                                                                                           |     | Fraction                                                                                       | Section Number |    | Township Number                                            | Range Number                                                              |  |  |  |  |
| County: <u>Butler</u>                                                                                                                                                                                                                                                                                                                                                      |     | SW 1/4 NE 1/4 SE 1/4                                                                           | 18             |    | T 28 S                                                     | R 3E <u>EW</u>                                                            |  |  |  |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>47th St. So. Rosehill Rd. NW corner Rosehill, Ks.</u>                                                                                                                                                                                                                |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| <b>2 WATER WELL OWNER:</b> <u>Robert Kincaid</u>                                                                                                                                                                                                                                                                                                                           |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| RR#, St. Address, Box # : <u>3213 Anemone</u>                                                                                                                                                                                                                                                                                                                              |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| City, State, ZIP Code : <u>Rose Hill, Ks.</u>                                                                                                                                                                                                                                                                                                                              |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| Board of Agriculture, Division of Water Resources<br>Application Number:                                                                                                                                                                                                                                                                                                   |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| <b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>                                                                                                                                                                                                                                                                                                                |     | <b>4 DEPTH OF COMPLETED WELL:</b> <u>105</u> ft. <b>ELEVATION:</b> .....                       |                |    |                                                            |                                                                           |  |  |  |  |
| <div style="text-align: center;">N<br/>1 Mile<br/>W<br/>E<br/>S</div> <table border="1" style="margin: auto; text-align: center;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE <u>X</u></td></tr></table>                                                                                                                                                          |     | NW                                                                                             | NE             | SW | SE <u>X</u>                                                | Depth(s) Groundwater Encountered 1. <u>45</u> ft. 2. .... ft. 3. .... ft. |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                            |     | NW                                                                                             | NE             |    |                                                            |                                                                           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                            |     | SW                                                                                             | SE <u>X</u>    |    |                                                            |                                                                           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                            |     | WELL'S STATIC WATER LEVEL <u>45</u> ft. below land surface measured on mo/day/yr <u>5-4-89</u> |                |    |                                                            |                                                                           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                            |     | 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 <u>11</u> in. to <u>105</u> 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 <u>X</u> ; If yes, mo/day/yr sample was submitted                                                                                                                                                                                                                                                |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| Water Well Disinfected? Yes <u>X</u> No                                                                                                                                                                                                                                                                                                                                    |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| <b>5 TYPE OF BLANK CASING USED:</b>                                                                                                                                                                                                                                                                                                                                        |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped .....                                                                                                                                                                                                                                                                              |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....                                                                                                                                                                                                                                                                                                         |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| Blank casing diameter <u>5</u> in. to <u>45</u> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.                                                                                                                                                                                                                                                                |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| Casing height above land surface <u>12</u> in., weight <u>1.59</u> lbs./ft. Wall thickness or gauge No. <u>203</u>                                                                                                                                                                                                                                                         |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>                                                                                                                                                                                                                                                                                                                             |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| 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) .....                                                                                                                                                                                                                                                                                                  |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| 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) .....                                                                                                                                                                                                                                                                                                                                       |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| <b>SCREEN-PERFORATED INTERVALS:</b> From <u>45</u> ft. to <u>105</u> ft., From ..... ft. to ..... ft.                                                                                                                                                                                                                                                                      |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| From ..... ft. to ..... ft., From ..... ft. to ..... ft.                                                                                                                                                                                                                                                                                                                   |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| <b>GRAVEL PACK INTERVALS:</b> From <u>24</u> ft. to <u>105</u> ft., From ..... ft. to ..... ft.                                                                                                                                                                                                                                                                            |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| From ..... ft. to ..... ft., From ..... ft. to ..... ft.                                                                                                                                                                                                                                                                                                                   |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| <b>6 GROUT MATERIAL:</b> 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....                                                                                                                                                                                                                                                                                            |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| Grout Intervals: From <u>4</u> ft. to <u>24</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 10 Livestock pens 14 Abandoned water well                                                                                                                                                                                                                                                                                        |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well                                                                                                                                                                                                                                                                                             |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)                                                                                                                                                                                                                                                                           |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| 13 Insecticide storage                                                                                                                                                                                                                                                                                                                                                     |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| Direction from well? <u>North</u> How many feet? <u>100</u>                                                                                                                                                                                                                                                                                                                |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                       | TO  | LITHOLOGIC LOG                                                                                 | FROM           | TO | PLUGGING INTERVALS                                         |                                                                           |  |  |  |  |
| 0                                                                                                                                                                                                                                                                                                                                                                          | 3   | topsoil                                                                                        |                |    |                                                            |                                                                           |  |  |  |  |
| 3                                                                                                                                                                                                                                                                                                                                                                          | 11  | clay                                                                                           |                |    |                                                            |                                                                           |  |  |  |  |
| 11                                                                                                                                                                                                                                                                                                                                                                         | 52  | brown shale                                                                                    |                |    |                                                            |                                                                           |  |  |  |  |
| 52                                                                                                                                                                                                                                                                                                                                                                         | 105 | grey shale                                                                                     |                |    |                                                            |                                                                           |  |  |  |  |
| <b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>5-4-89</u> and this record is true to the best of my knowledge and belief, Kansas                                                                                                   |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| Water Well Contractor's License No. <u>236</u> This Water Well Record was completed on (mo/day/yr) <u>6-7-89</u>                                                                                                                                                                                                                                                           |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |
| under the business name of <u>Harp Well and Pump Service, Inc.</u> by (signature) <u>Mary Arnold</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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records. |     |                                                                                                |                |    |                                                            |                                                                           |  |  |  |  |

OFFICE USE ONLY

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