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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|----------------------------------|------------------------------|
| 1 LOCATION OF WATER WELL:<br>County: <u>Sedgwick</u>                                                                                                                                                                                                                                                                                                                                                                                                                         |  | Fraction: <u>NW 1/4 NW 1/4 SE 1/4</u>                                                                                                                                                                                                                                  | Section Number: <u>12</u> | Township Number: <u>T 29 S</u>   | Range Number: <u>R 1 E/W</u> |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>Baltimore &amp; Sunny Dell</u>                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| 2 WATER WELL OWNER: <u>Fina Oil and Chemical</u>                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| RR#, St. Address, Box # : _____<br>City, State, ZIP Code : _____                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| 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>55.0</u> ft. ELEVATION: _____                                                                                                                                                                                                            |                           |                                  |                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | Depth(s) Groundwater Encountered <u>44.5</u> ft. 2. _____ ft. 3. _____ ft.                                                                                                                                                                                             |                           |                                  |                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | WELL'S STATIC WATER LEVEL <u>44.7</u> ft. below land surface measured on <u>mo/day/yr</u> <u>3/3/89</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>12.0</u> in. to _____ ft., and _____ in. to _____ ft.                                                                                                                                                                                           |                           |                                  |                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | 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 Lawn and garden only      10 Observation 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 _____ No <u>X</u>                                                                                                                                                                                                                          |                           |                                  |                              |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| 1 Steel      3 RMP (SR)      5 Wrought iron      8 Concrete tile      CASING JOINTS: Glued _____ Clamped _____<br>2 PVC      4 ABS      6 Asbestos-Cement      9 Other (specify below)      Welded _____<br>7 Fiberglass      Threaded <u>X</u>                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| Blank casing diameter <u>4.0</u> in. to <u>40.0</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| Casing height above land surface <u>2.0</u> in., weight <u>2.0</u> lbs./ft. Wall thickness or gauge No. <u>40</u>                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| 1 Steel      3 Stainless steel      5 Fiberglass      7 PVC      10 Asbestos-cement<br>2 Brass      4 Galvanized steel      6 Concrete tile      8 RMP (SR)      11 Other (specify) _____<br>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)<br>2 Louvered shutter      4 Key punched      6 Wire wrapped      9 Drilled holes<br>7 Torch cut      10 Other (specify) _____                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| SCREEN-PERFORATED INTERVALS: From <u>40.0</u> ft. to <u>55.0</u> ft., From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| 6 GROUT MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| 1 Neat cement      2 Cement grout      3 Bentonite      4 Other _____<br>Grout Intervals: From <u>30</u> ft. to _____ 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<br>2 Sewer lines      5 Cess pool      8 Sewage lagoon      11 Fuel storage (former)      15 Oil well/Gas well<br>3 Watertight sewer lines      6 Seepage pit      9 Feedyard      12 Fertilizer storage      16 Other (specify below) _____<br>13 Insecticide storage                                                                                               |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| Direction from well? <u>N.E.</u> How many feet? <u>100'</u>                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | TO                                                                                                                                                                                                                                                                     |                           | LITHOLOGIC LOG                   |                              |
| <u>0.0</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | <u>0.0</u>                                                                                                                                                                                                                                                             |                           | <u>SILTY CLAY: Dark Brown</u>    |                              |
| <u>0.0</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | <u>30.0</u>                                                                                                                                                                                                                                                            |                           | <u>SANDY CLAY: Reddish Brown</u> |                              |
| <u>30.0</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | <u>52.0</u>                                                                                                                                                                                                                                                            |                           | <u>SILTY SAND: Pale Brown</u>    |                              |
| <u>52.0</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | <u>55.0</u>                                                                                                                                                                                                                                                            |                           | <u>Weathered Shale</u>           |                              |
| <p>Note: Casing height &amp; grout interval do not meet Kansas guidelines.</p>                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |
| 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>2/9/89</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>496</u> This Water Well Record was completed on (mo/day/yr) <u>3/8/89</u> under the business name of <u>Groundwater Technology</u> by (signature) <u>Caul Camer</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: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.                                                                                                   |  |                                                                                                                                                                                                                                                                        |                           |                                  |                              |