

|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              |                                                                            |                          |    |                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|--------------------------|----|----------------|
| <b>1 LOCATION OF WATER WELL</b>                                                                                                                                                                                                                                                                                                                               |  | Fraction<br>SW ¼ SW ¼ SW ¼ | Section Number<br>30                                                                                         | Township Number<br>T 29 S                                                  | Range Number<br>R 1 E EW |    |                |
| County: <u>SEDGWICK</u>                                                                                                                                                                                                                                                                                                                                       |  |                            | Distance and direction from nearest town or city?                                                            |                                                                            |                          |    |                |
| 2 WATER WELL OWNER: <u>Diane Paul</u>                                                                                                                                                                                                                                                                                                                         |  |                            | Street address of well if located within city? <u>Peck, Ks.</u><br><u>111th S. &amp; Meridian, NE corner</u> |                                                                            |                          |    |                |
| RR#, St. Address, Box # : <u>R.R. 1</u>                                                                                                                                                                                                                                                                                                                       |  |                            | Board of Agriculture, Division of Water Resources                                                            |                                                                            |                          |    |                |
| City, State, ZIP Code : <u>Peck, Ks.</u>                                                                                                                                                                                                                                                                                                                      |  |                            | Application Number:                                                                                          |                                                                            |                          |    |                |
| 3 DEPTH OF COMPLETED WELL: <u>60</u> ft. Bore Hole Diameter: <u>11</u> in. to . . . . . ft., and . . . . . in. to . . . . . ft.                                                                                                                                                                                                                               |  |                            |                                                                                                              |                                                                            |                          |    |                |
| Well Water to be used as:                                                                                                                                                                                                                                                                                                                                     |  |                            |                                                                                                              |                                                                            |                          |    |                |
| 1 Domestic                                                                                                                                                                                                                                                                                                                                                    |  | 3 Feedlot                  |                                                                                                              | 5 Public water supply                                                      |                          |    |                |
| 2 Irrigation                                                                                                                                                                                                                                                                                                                                                  |  | 4 Industrial               |                                                                                                              | 6 Oil field water supply                                                   |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  | 7 Lawn and garden only     |                                                                                                              | 8 Air conditioning                                                         |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  | 10 Observation well        |                                                                                                              | 9 Dewatering                                                               |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 11 Injection well                                                          |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 12 Other (Specify below)                                                   |                          |    |                |
| Well's static water level . . . <u>14</u> ft. below land surface measured on . . . <u>9</u> month . . . <u>22</u> day . . . <u>80</u> year                                                                                                                                                                                                                    |  |                            |                                                                                                              |                                                                            |                          |    |                |
| Pump Test Data : Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm                                                                                                                                                                                                                                                                     |  |                            |                                                                                                              |                                                                            |                          |    |                |
| Est. Yield gpm: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm                                                                                                                                                                                                                                                                      |  |                            |                                                                                                              |                                                                            |                          |    |                |
| 4 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                  |  |                            |                                                                                                              |                                                                            |                          |    |                |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                       |  | 3 RMP (SR)                 |                                                                                                              | 5 Wrought iron                                                             |                          |    |                |
| 2 PVC                                                                                                                                                                                                                                                                                                                                                         |  | 4 ABS                      |                                                                                                              | 6 Asbestos-Cement                                                          |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 7 Fiberglass                                                               |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 8 Concrete tile                                                            |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 9 Other (specify below)                                                    |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | Casing Joints: Glued <input checked="" type="checkbox"/> Clamped . . . . . |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | Welded . . . . .                                                           |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | Threaded . . . . .                                                         |                          |    |                |
| Blank casing dia . . . <u>5</u> in. to . . . <u>40</u> ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.                                                                                                                                                                                                                                            |  |                            |                                                                                                              |                                                                            |                          |    |                |
| Casing height above land surface . . . <u>12</u> in., weight . . . lbs./ft. Wall thickness or gauge No . . . <u>200</u>                                                                                                                                                                                                                                       |  |                            |                                                                                                              |                                                                            |                          |    |                |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                       |  |                            |                                                                                                              |                                                                            |                          |    |                |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                       |  | 3 Stainless steel          |                                                                                                              | 5 Fiberglass                                                               |                          |    |                |
| 2 Brass                                                                                                                                                                                                                                                                                                                                                       |  | 4 Galvanized steel         |                                                                                                              | 6 Concrete tile                                                            |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 7 PVC                                                                      |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 8 RMP (SR)                                                                 |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 9 ABS                                                                      |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 10 Asbestos-cement                                                         |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 11 Other (specify)                                                         |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 12 None used (open hole)                                                   |                          |    |                |
| Screen or Perforation Openings Are:                                                                                                                                                                                                                                                                                                                           |  |                            |                                                                                                              |                                                                            |                          |    |                |
| 1 Continuous slot                                                                                                                                                                                                                                                                                                                                             |  | 3 Mill slot                |                                                                                                              | 5 Gauzed wrapped                                                           |                          |    |                |
| 2 Louvered shutter                                                                                                                                                                                                                                                                                                                                            |  | 4 Key punched              |                                                                                                              | 6 Wire wrapped                                                             |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 7 Torch cut                                                                |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 8 Saw cut                                                                  |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 9 Drilled holes                                                            |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 10 Other (specify)                                                         |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 11 None (open hole)                                                        |                          |    |                |
| Screen-Perforation Dia . . . <u>5</u> in. to . . . <u>60</u> ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.                                                                                                                                                                                                                                      |  |                            |                                                                                                              |                                                                            |                          |    |                |
| Screen-Perforated Intervals: From . . . <u>40</u> ft. to . . . <u>60</u> ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.                                                                                                                                                                                                                        |  |                            |                                                                                                              |                                                                            |                          |    |                |
| Gravel Pack Intervals: From . . . <u>14</u> ft. to . . . <u>60</u> ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.                                                                                                                                                                                                                              |  |                            |                                                                                                              |                                                                            |                          |    |                |
| 5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other                                                                                                                                                                                                                                                                                            |  |                            |                                                                                                              |                                                                            |                          |    |                |
| Grouted Intervals: From . . . <u>40</u> ft. to . . . <u>14</u> ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.                                                                                                                                                                                                                                  |  |                            |                                                                                                              |                                                                            |                          |    |                |
| What is the nearest source of possible contamination:                                                                                                                                                                                                                                                                                                         |  |                            |                                                                                                              |                                                                            |                          |    |                |
| 1 Septic tank                                                                                                                                                                                                                                                                                                                                                 |  | 4 Cess pool                |                                                                                                              | 7 Sewage lagoon                                                            |                          |    |                |
| 2 Sewer lines                                                                                                                                                                                                                                                                                                                                                 |  | 5 Seepage pit              |                                                                                                              | 8 Feed yard                                                                |                          |    |                |
| 3 Lateral lines                                                                                                                                                                                                                                                                                                                                               |  | 6 Pit privy                |                                                                                                              | 9 Livestock pens                                                           |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 10 Fuel storage                                                            |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 11 Fertilizer storage                                                      |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 12 Insecticide storage                                                     |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 13 Watertight sewer lines                                                  |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 14 Abandoned water well                                                    |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 15 Oil well/Gas well                                                       |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | 16 Other (specify below)                                                   |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  |                            |                                                                                                              | None Apparent                                                              |                          |    |                |
| Direction from well . . . . . How many feet . . . . . ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                    |  |                            |                                                                                                              |                                                                            |                          |    |                |
| Was a chemical/bacteriological sample submitted to Department? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> If yes, date sample was submitted . . . month . . . day . . . year: Pump Installed? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>                                              |  |                            |                                                                                                              |                                                                            |                          |    |                |
| If Yes: Pump Manufacturer's name . . . . . Model No. . . . . HP . . . . . Volts . . . . .                                                                                                                                                                                                                                                                     |  |                            |                                                                                                              |                                                                            |                          |    |                |
| Depth of Pump Intake . . . . . ft. Pumps Capacity rated at . . . . . gal./min.                                                                                                                                                                                                                                                                                |  |                            |                                                                                                              |                                                                            |                          |    |                |
| Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other                                                                                                                                                                                                                                                                             |  |                            |                                                                                                              |                                                                            |                          |    |                |
| 6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on . . . <u>9</u> month . . . <u>22</u> day . . . <u>80</u> year                                                                                                                                  |  |                            |                                                                                                              |                                                                            |                          |    |                |
| 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 . . . <u>11</u> month . . . <u>17</u> day . . . <u>1980</u> year under the business name of <u>HARW Harp Well &amp; Pump Serv., Inc.</u> by (signature) <u>m. Arnold</u>                                                                                                                                              |  |                            |                                                                                                              |                                                                            |                          |    |                |
| 7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                          |  | FROM                       | TO                                                                                                           | LITHOLOGIC LOG                                                             | FROM                     | TO | LITHOLOGIC LOG |
|                                                                                                                                                                                                                                                                                                                                                               |  | 0                          | 3                                                                                                            | Topsoil                                                                    |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  | 3                          | 18                                                                                                           | Clay                                                                       |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  | 18                         | 37                                                                                                           | Fine Sand                                                                  |                          |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  | 37                         | 60                                                                                                           | Medium Sand                                                                |                          |    |                |
| ELEVATION:                                                                                                                                                                                                                                                                                                                                                    |  |                            |                                                                                                              |                                                                            |                          |    |                |
| Depth(s) Groundwater Encountered 1. <u>14</u> ft. 2. . . . . ft. 3. . . . . ft. 4. . . . . ft. (Use a second sheet if needed)                                                                                                                                                                                                                                 |  |                            |                                                                                                              |                                                                            |                          |    |                |
| 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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records. |  |                            |                                                                                                              |                                                                            |                          |    |                |