

1 LOCATION OF WATER WELL: Sedgwick		FRACTION SW 1/4 SW 1/4 NW 1/4	SECTION NUMBER 29	TOWNSHIP NUMBER T 29 S	RANGE NUMBER R 2E E/W																																																																																																																								
Distance and direction from nearest town or city street address of well if located within city? 1931 Country Walk Mulvane, Kansas																																																																																																																													
2	WATER WELL OWNER: YOST, Caroline RR#,ST. ADDRESS,BOX #: 1931 Country Walk Mulvane, Kansas CITY, STATE: Mulvane, Kansas ZIP CODE: _____ Application Number: _____ Board of Agriculture, Division of Water Resource																																																																																																																												
3	LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 																																																																																																																												
4	DEPTH OF COMPLETED WELL: 85 ft. ELEVATION: _____ Depth of groundwater Encountered: _____ ft. WELL'S STATIC WATER LEVEL 40 FT. BELOW LAND SURFACE MEASURED ON mo/day/yr: 7/13/04 Pump test data: Well water was _____ ft. after _____ hours of pumping @ _____ gpm Est. Yield: _____ gpm Well water was _____ ft. after _____ hours of pumping @ _____ gpm Bore Hole Diameter 12 in. to 85 ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 1. Domestic 3. Feedlot 5. Public water supply <u>7. Lawn and garden only</u> 9. Dewatering 11. Injection well 2. Irrigation 4. Industrial 6. Oil field water supply 8. Air conditioning 10. Monitoring well 12. Other (Specify below) _____ Was a chemical/bacteriological sample submitted to Department? YES <u>NO</u> ; If yes, what mo/day/yr was sample submitted _____ YES <u>YES</u> NO																																																																																																																												
5	TYPE OF CASING USED: 1. Steel 3. RPM (SR) 5. Wrought Iron 7. Fiberglass 9. Other (Specify below) <u>2. PVC</u> 4. ABS 6. Asbestos-Cement 8. Concrete tile SDR-26 Blank casing diameter 5 in. to 65 ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft. Casing height above land surface: 12 in., Weight: 2.35 lbs. / ft. Wall thickness or gauge No. .214 TYPE OF SCREEN OR PERFORATION MATERIAL: 1. Steel 3. Stainless Steel 5. Fiberglass <u>7. PVC</u> 9. ABS 11. Other (specify) _____ 2. Brass 4. Galvanized 6. Concrete Tile 8. RMP (SR) 10. Asbestos-Cement 12. None used (open hole) _____ SCREEN OR PERFORATION OPENINGS ARE: 1. Continuous slot 3. Mill slot 5. Gauzed wrapped 7. Torch cut 9. Drilled holes 11. None (open hole) 2. Louvered shutter 4. Key punched 6. Wire wrapped <u>8. Saw cut</u> 10. Other (specify) _____ SCREEN - PERFORATION INTERVAL From 65 ft. to 85 ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 24 ft. to 85 ft., From _____ ft. to _____ ft.																																																																																																																												
6	GROUT MATERIALS: 1. Neat cement 2. Cement Grout 3. Bentonite Other bentonite hole plug Grout Intervals: From 4 ft. to 24 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 13. Insecticide storage 15. Oil well/Gas well 2. Sewer lines 5. Cess Pool 8. Sewage lagoon 11. Fuel storage 14. Abandon water well 16. Other (specify below) _____ <u>3. Watertight sewer line</u> 6. Seepage pit 9. Feed yard 12. Fertilizer storage _____ Direction from well? North How many feet? 30																																																																																																																												
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>From</th> <th>To</th> <th>LITHOLOGIC LOG</th> <th>From</th> <th>To</th> <th>LITHOLOGIC LOG</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>4</td> <td>topsoil</td> <td></td> <td></td> <td></td> </tr> <tr> <td>4</td> <td>53</td> <td>sandy clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>53</td> <td>80</td> <td>sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>80</td> <td>85</td> <td>shale</td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>						From	To	LITHOLOGIC LOG	From	To	LITHOLOGIC LOG	0	4	topsoil				4	53	sandy clay				53	80	sand				80	85	shale																																																																																													
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7	Contractor's or Landowner's Certification: This water well was <u>1. constructed</u> 2. reconstructed or 3. plugged under my jurisdiction and was completed on (mo/day/year) 7/13/2004 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236 This water well record was completed on (mo/day/year) 7/16/2004 under the business name of Harp Well & Pump Service Inc. by (signature) <i>J d d S. Harp</i>																																																																																																																												