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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------|--|----------------|--|-----------------------------|--|-------------------------------|--|--------------------|--|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | Fraction                                                                                           |  | Section Number |  | Township Number             |  | Range Number                  |  |                    |  |
| County: <u>Sedgwick</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | <u>SW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$                            |  | <u>32</u>      |  | <u>T</u> <u>29</u> <u>S</u> |  | <u>R</u> <u>2E</u> <u>E/W</u> |  |                    |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>520 Luella Mulvane, Ks.</u>                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| 2 WATER WELL OWNER: <u>Ingalls Electric</u><br>RR#, St. Address, Box #: <u>104 W. Main</u><br>City, State, ZIP Code: <u>Mulvane, Ks.</u><br>Board of Agriculture, Division of Water Resources<br>Application Number:                                                                                                                                                                                                                                                                      |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 4 DEPTH OF COMPLETED WELL <u>40</u> ft. ELEVATION:                                                 |  |                |  |                             |  |                               |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.                      |  |                |  |                             |  |                               |  |                    |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | WELL'S STATIC WATER LEVEL <u>12</u> ft. below land surface measured on mo/day/yr <u>7-10-90</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>1.1</u> in. to <u>40</u> 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 Monitoring well                                                                                                                                                                                                                                        |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| Was a chemical/bacteriological sample submitted to Department? Yes . . . . . No <u>X</u> . . . . .; If yes, mo/day/yr sample was submitted                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| Water Well Disinfected? Yes <u>X</u> No                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| 1 Steel 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>25</u> ft., Dia. <u>2.29</u> in. to . . . . . ft., Dia. . . . . in. to . . . . . ft.                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| Casing height above land surface <u>12</u> in., weight <u>2.29</u> lbs./ft. Wall thickness or gauge No. <u>.214</u>                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| SCREEN-PERFORATED INTERVALS: From <u>25</u> ft. to <u>40</u> ft., From . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| GRAVEL PACK INTERVALS: From <u>24</u> ft. to <u>40</u> ft., From . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| 6 GROUT MATERIAL: 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.                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| 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>East</u> How many feet? <u>40</u>                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | TO                                                                                                 |  | LITHOLOGIC LOG |  | FROM                        |  | TO                            |  | PLUGGING INTERVALS |  |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | 3                                                                                                  |  | topsoil        |  |                             |  |                               |  |                    |  |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | 12                                                                                                 |  | clay           |  |                             |  |                               |  |                    |  |
| 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 30                                                                                                 |  | fine sand      |  |                             |  |                               |  |                    |  |
| 30                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 40                                                                                                 |  | medium sand    |  |                             |  |                               |  |                    |  |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>7-10-90</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>9-30-90</u> under the business name of <u>Harp Well and Pump Service, Inc.</u> by (signature) <u>Mary Arnold</u> |  |                                                                                                    |  |                |  |                             |  |                               |  |                    |  |