

|                           |                             |                |                 |                      |
|---------------------------|-----------------------------|----------------|-----------------|----------------------|
| 1 LOCATION OF WATER WELL  | Fraction                    | Section Number | Township Number | Range Number         |
| County: <u>WASHINGTON</u> | <u>SE 1/4 SE 1/4 SE 1/4</u> | <u>15</u>      | T <u>2</u> S    | R <u>1</u> <u>EW</u> |

Distance and direction from nearest town or city? 1 NORTH HADDAM Street address of well if located within city?

2 WATER WELL OWNER: WENDELL HADDAM, KANSAS 66944  
 RR#, St. Address, Box #: ZINGER Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: ZINGER KANSAS 66944 Application Number:

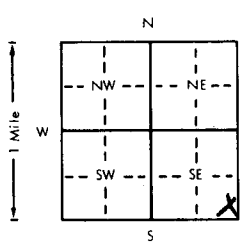
3 DEPTH OF COMPLETED WELL: 40 ft. Bore Hole Diameter: 8 in. to 40 ft., and \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Well Water to be used as:  
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well  
 Well's static water level: 20 ft. below land surface measured on \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year  
 Pump Test Data: Well water was NA ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield: 5 gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded \_\_\_\_\_  
 2 PVC 4 ABS 7 Fiberglass \_\_\_\_\_ Threaded \_\_\_\_\_  
 Casing Joints: Glued  Clamped \_\_\_\_\_  
 Blank casing dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface: 12 in., weight 3 lbs./ft. Wall thickness or gauge No. 250

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) \_\_\_\_\_  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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)  
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes  
 7 Torch cut 10 Other (specify) \_\_\_\_\_  
 Screen-Perforation Dia: 5 in. to 40 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Screen-Perforated Intervals: From 20 ft. to 40 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Gravel Pack Intervals: From 10 ft. to 40 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 0 ft. to 10 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 10 Fuel storage 14 Abandoned water well  
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well  
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)  
 Direction from well: WEST How many feet: 50 ? Water Well Disinfected? Yes  No \_\_\_\_\_  
 Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No  If yes, date sample was submitted \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year: Pump Installed? Yes \_\_\_\_\_ No   
 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  constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 359  
 This Water Well Record was completed on \_\_\_\_\_ month \_\_\_\_\_ day \_\_\_\_\_ year under the business name of DARYL COX + SONS INC by (signature) Daryl Cox 1981

|  |           |           |                |                                 |    |                |  |
|--|-----------|-----------|----------------|---------------------------------|----|----------------|--|
| 7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:<br> | FROM      | TO        | LITHOLOGIC LOG | FROM                            | TO | LITHOLOGIC LOG |  |
|  |           | <u>0</u>  | <u>3</u>       | <u>TOPSOIL</u>                  |    |                |  |
|  |           | <u>3</u>  | <u>15</u>      | <u>BROWN CLAY</u>               |    |                |  |
|  |           | <u>15</u> | <u>35</u>      | <u>SANDY BROWN CLAY</u>         |    |                |  |
|  |           | <u>35</u> | <u>40</u>      | <u>BROWN CLAY w/ GYP LAYERS</u> |    |                |  |
|  | <u>40</u> |           | <u>STOP</u>    |                                 |    |                |  |

ELEVATION: 1400

Depth(s) Groundwater Encountered 1. \_\_\_\_\_ 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.

OFFICE USE ONLY  
T  
R  
SEC 15  
SE 1/4  
SE 1/4  
SE 1/4