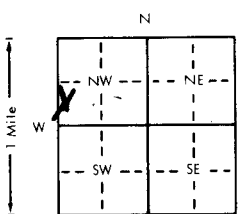


|   |  |                             |  |                       |               |    |                |
|---|--|-----------------------------|--|-----------------------|---------------|----|----------------|
| 1 LOCATION OF WATER WELL  |  | Fraction                    | Section Number                                 | Township Number       | Range Number  |    |                |
| County: <u>Sumner</u>   |  | <u>NW 1/4 SW 1/4 NW 1/4</u> | <u>10</u>                                      | T <u>30</u> S         | R <u>1</u> EW |    |                |
| Distance and direction from nearest town or city?   |  |                             | Street address of well if located within city? |                       |               |    |                |
|   |  |                             | <u>#21 Greenfield Peck, Kansas</u>             |                       |               |    |                |
| 2 WATER WELL OWNER: <u>Don Nickelson Constr.</u>  |  |                             |  |                       |               |    |                |
| RR#, St. Address, Box #: <u>P.O. Box 63</u>   |  |                             |  |                       |               |    |                |
| City, State, ZIP Code: <u>Peck, Kansas 67120</u>  |  |                             |  |                       |               |    |                |
| Board of Agriculture, Division of Water Resources   |  |                             |  |                       |               |    |                |
| Application Number:   |  |                             |  |                       |               |    |                |
| 3 DEPTH OF COMPLETED WELL: <u>40</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 8 Air conditioning 11 Injection well   |  |                             |  |                       |               |    |                |
| 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  |  |                             |  |                       |               |    |                |
| 7 Lawn and garden only 10 Observation well  |  |                             |  |                       |               |    |                |
| Well's static water level: <u>20</u> ft. below land surface measured on <u>4</u> month <u>22</u> day <u>1980</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 8 Concrete tile Casing Joints: Glued <input checked="" type="checkbox"/> Clamped  |  |                             |  |                       |               |    |                |
| 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded  |  |                             |  |                       |               |    |                |
| 7 Fiberglass Threaded   |  |                             |  |                       |               |    |                |
| Blank casing dia: <u>5</u> in. to <u>20</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 7 PVC 10 Asbestos-cement   |  |                             |  |                       |               |    |                |
| 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)  |  |                             |  |                       |               |    |                |
| 12 None used (open hole)  |  |                             |  |                       |               |    |                |
| Screen or Perforation Openings Are:   |  |                             |  |                       |               |    |                |
| 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut <u>.06</u> 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: <u>5</u> in. to <u>40</u> ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.   |  |                             |  |                       |               |    |                |
| Screen-Perforated Intervals: From <u>20</u> ft. to <u>40</u> ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  |  |                             |  |                       |               |    |                |
| Gravel Pack Intervals: From <u>14</u> ft. to <u>40</u> ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  |  |                             |  |                       |               |    |                |
| 5 GROUT MATERIAL:   |  |                             |  |                       |               |    |                |
| 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other   |  |                             |  |                       |               |    |                |
| Grouted Intervals: From <u>40"</u> to <u>14</u> ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.   |  |                             |  |                       |               |    |                |
| What is the nearest source of possible contamination: <u>Septic system not installed at this time</u>   |  |                             |  |                       |               |    |                |
| 1 Septic tank 4 Cess pool 7 Sewage tank 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)  |  |                             |  |                       |               |    |                |
| 13 Watertight sewer lines   |  |                             |  |                       |               |    |                |
| Direction from well: . . . . . How many feet: . . . . . ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No  |  |                             |  |                       |               |    |                |
| Was a chemical/bacteriological sample submitted to Department? Yes . . . . . 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: <u>Pump not installed by our Co.</u> 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) <u>constructed</u> (2) reconstructed, or (3) plugged under my jurisdiction and was   |  |                             |  |                       |               |    |                |
| completed on <u>4</u> month <u>22</u> day <u>1980</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>6</u> month <u>9</u> day <u>1980</u> year under the business   |  |                             |  |                       |               |    |                |
| name of <u>Harp Well 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  | Sandy peif            |               |    |                |
|   |  | 3                           | 18   | Sandy Clay            |               |    |                |
|   |  | 18                          | 28   | Medium to Coarse Sand |               |    |                |
|   |  | 28                          | 40   | Blue Shale            |               |    |                |
| ELEVATION:  |  |                             |  |                       |               |    |                |
| Depth(s) Groundwater Encountered 1. <u>20</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. |  |                             |  |                       |               |    |                |