

|  |            |  |   |   |                        |
|--|------------|--|---|---|------------------------|
| 1 LOCATION OF WATER WELL:  |            | Fraction   | Section Number  | Township Number                                   | Range Number           |
| County: <b>Wichita</b>   |            | <b>SW</b> $\frac{1}{4}$ <b>NW</b> $\frac{1}{4}$ <b>SW</b> $\frac{1}{4}$  | <b>24</b>   | T <b>16</b> S                                     | R <b>36</b> E <b>W</b> |
| Distance and direction from nearest town or city street address of well if located within city?  |            |  |   |   |                        |
| 2 WATER WELL OWNER: <b>Wilbert &amp; Margie Koehn</b>  |            |  |   |   |                        |
| RR#, St. Address, Box #  |            | City, State, ZIP Code  |   | Board of Agriculture, Division of Water Resources |                        |
| <b>Rt. 1, Box 95</b>   |            | <b>Marienthal, Ks 67863</b>  |   | Application Number: <b>4732</b>                   |                        |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:   |            | 4 DEPTH OF COMPLETED WELL <b>198</b> ft. ELEVATION:  |   |   |                        |
|  |            | Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.   |   |   |                        |
|  |            | WELL'S STATIC WATER LEVEL _____ NA   |   |   |                        |
|  |            | 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 <b>28</b> in. to <b>198</b> ft. and _____ in. to _____ ft.  |   |   |                        |
|  |            | WELL WATER TO BE USED AS:  |   |   |                        |
|  |            | 1 Domestic 2 Feed lot 3 Oil field water supply 4 Air conditioning 5 Injection well<br>6 Irrigation 7 Industrial 8 Lawn and garden (domestic) 9 Dewatering 10 Other (Specify below) |   |   |                        |
|  |            | Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted _____  |   |   |                        |
| 5 TYPE OF BLANK CASING USED:   |            | CASING JOINTS: Glued <b>X</b> Clamped _____  |   |   |                        |
| 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought Iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)   |            | Welded _____ Threaded _____  |   |   |                        |
| Blank casing diameter <b>16</b> in. to <b>158</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.  |            | Casing height above land surface <b>24</b> in., weight <b>16.15</b> lbs./ft. Wall thickness or gauge No. <b>.500</b>   |   |   |                        |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  |            | 10 Asbestos-cement 11 Other (specify) _____ 12 None used (open hole)   |   |   |                        |
| 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) _____ 11 None (open hole)   |            |  |   |   |                        |
| SCREEN OR PERFORATION OPENINGS ARE:  |            |  |   |   |                        |
| 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) _____ 11 None (open hole)  |            |  |   |   |                        |
| SCREEN-PERFORATED INTERVALS:   |            | From <b>158</b> ft. to <b>198</b> ft. From _____ ft. to _____ ft.  |   |   |                        |
| GRAVEL PACK INTERVALS:   |            | From <b>25</b> ft. to <b>198</b> ft. From _____ ft. to _____ ft.   |   |   |                        |
| 6 GROUT MATERIAL:  |            | 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____   |   |   |                        |
| Grout Intervals From <b>0</b> ft. to <b>25</b> ft. From _____ ft. to _____ ft.   |            |  |   |   |                        |
| What is the nearest source of possible contamination:  |            | 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/ Gas well 16 Other (specify below) <b>Old well</b>              |   |   |                        |
| 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard  |            |  |   |   |                        |
| Direction from well? <b>SO</b>   |            | How many feet? <b>73</b>   |   |   |                        |
| FROM   | TO         | CODE   | LITHOLOGIC LOG  | FROM  | TO                     |
| <b>0</b>   | <b>2</b>   |  | <b>Surface</b>  | <b>145</b>  | <b>160</b>             |
| <b>2</b>   | <b>24</b>  |  | <b>Loess</b>  |   |                        |
| <b>24</b>  | <b>34</b>  |  | <b>Clay w/caliche strks</b>                                   | <b>160</b>  | <b>180</b>             |
| <b>34</b>  | <b>73</b>  |  | <b>Caliche w/clay strks (few hard strks)</b>                  | <b>180</b>  | <b>191</b>             |
|  |            |  |   | <b>191</b>  | <b>198</b>             |
| <b>73</b>  | <b>84</b>  |  | <b>Clay w/caliche strks</b>                                   |   |                        |
| <b>84</b>  | <b>98</b>  |  | <b>Fine sand w/clay &amp; caliche strks (dirty)</b>           |   |                        |
| <b>98</b>  | <b>118</b> |  | <b>Fine to some med sd w/clay strk (tight)</b>                |   |                        |
| <b>118</b>   | <b>130</b> |  | <b>Fine to some med sd w/clay &amp; Caliche strks (tight)</b> |   |                        |
| <b>130</b>   | <b>145</b> |  | <b>Fine to med sd w/caliche lenses (semi-loose)</b>           |   |                        |
| 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/yr) <b>10-5-07</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>554</b> This Water Well Record was completed on (mo/day/yr) <b>10-25-07</b> under the business name of <b>Woofter Pump &amp; Well Inc.</b> by (signature) <i>[Signature]</i> |            |  |   |   |                        |
| INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-298-5545. Send one to WATER WELL OWNER and retain one for your records.   |            |  |   |   |                        |

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