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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------|--|----------------|--|-----------------|--|--------------|--|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                                            |  | Fraction             |  | Section Number |  | Township Number |  | Range Number |  |
| County: Barton                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | NE 1/4 NE 1/4 NW 1/4 |  | 27             |  | T 19 S          |  | R 11W EW     |  |
| Distance and direction from nearest town or city street address of well if located within city?                                                                                                                                                                                                                                                                                                                                                      |  |                      |  |                |  |                 |  |              |  |
| 1 N of Ellinwood, Kansas                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                      |  |                |  |                 |  |              |  |
| 2 WATER WELL OWNER: Tammy Dwinell                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                      |  |                |  |                 |  |              |  |
| RR#, St. Address, Box #: 1014 Morphy                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                      |  |                |  |                 |  |              |  |
| City, State, ZIP Code: Great Bend, Kansas 67530                                                                                                                                                                                                                                                                                                                                                                                                      |  |                      |  |                |  |                 |  |              |  |
| Board of Agriculture, Division of Water Resources                                                                                                                                                                                                                                                                                                                                                                                                    |  |                      |  |                |  |                 |  |              |  |
| Application Number:                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                      |  |                |  |                 |  |              |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                                 |  |                      |  |                |  |                 |  |              |  |
| 4 DEPTH OF COMPLETED WELL: 51 ft. ELEVATION: Unknown                                                                                                                                                                                                                                                                                                                                                                                                 |  |                      |  |                |  |                 |  |              |  |
| Depth(s) Groundwater Encountered 1. 19 ft. 2. ft. 3. ft.                                                                                                                                                                                                                                                                                                                                                                                             |  |                      |  |                |  |                 |  |              |  |
| WELL'S STATIC WATER LEVEL 19 ft. below land surface measured on mo/day/yr 8/4/94                                                                                                                                                                                                                                                                                                                                                                     |  |                      |  |                |  |                 |  |              |  |
| Pump test data: Well water was ft. after hours pumping gpm                                                                                                                                                                                                                                                                                                                                                                                           |  |                      |  |                |  |                 |  |              |  |
| Est. Yield 50 gpm: Well water was ft. after hours pumping gpm                                                                                                                                                                                                                                                                                                                                                                                        |  |                      |  |                |  |                 |  |              |  |
| Bore Hole Diameter 8 in. to 51 ft. and in. to ft.                                                                                                                                                                                                                                                                                                                                                                                                    |  |                      |  |                |  |                 |  |              |  |
| WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well                                                                                                                                                                                                                                                                                                                                                                 |  |                      |  |                |  |                 |  |              |  |
| 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 Monitoring well                                                                                                                                                                                                                                                                                                                                                                                  |  |                      |  |                |  |                 |  |              |  |
| Was a chemical/bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submitted                                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| Water Well Disinfected? Yes No                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                      |  |                |  |                 |  |              |  |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped                                                                                                                                                                                                                                                                                                                                                                       |  |                      |  |                |  |                 |  |              |  |
| 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded                                                                                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| 7 Fiberglass Threaded                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                      |  |                |  |                 |  |              |  |
| Blank casing diameter 5 in. to 41 ft. Dia in. to ft. Dia in. to ft.                                                                                                                                                                                                                                                                                                                                                                                  |  |                      |  |                |  |                 |  |              |  |
| Casing height above land surface 12 in. weight 2.8 lbs./ft. Wall thickness or gauge No. Sch. 40                                                                                                                                                                                                                                                                                                                                                      |  |                      |  |                |  |                 |  |              |  |
| 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 11 None (open hole)                                                                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes                                                                                                                                                                                                                                                                                                                                                                                      |  |                      |  |                |  |                 |  |              |  |
| 7 Torch cut 10 Other (specify)                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                      |  |                |  |                 |  |              |  |
| SCREEN-PERFORATED INTERVALS: From 41 ft. to 51 ft. From ft. to ft. From ft. to ft. From ft. to ft.                                                                                                                                                                                                                                                                                                                                                   |  |                      |  |                |  |                 |  |              |  |
| GRAVEL PACK INTERVALS: From 20 ft. to 51 ft. From ft. to ft. From ft. to ft. From ft. to ft.                                                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other                                                                                                                                                                                                                                                                                                                                                                                   |  |                      |  |                |  |                 |  |              |  |
| Grout intervals: From 0 ft. to 20 ft. From ft. to 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 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? North How many feet? 75                                                                                                                                                                                                                                                                                                                                                                                                         |  |                      |  |                |  |                 |  |              |  |
| FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS                                                                                                                                                                                                                                                                                                                                                                                                    |  |                      |  |                |  |                 |  |              |  |
| 0 22 Top soil and clay                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                      |  |                |  |                 |  |              |  |
| 22 51 Sand and gravel                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                      |  |                |  |                 |  |              |  |
| 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) 8/4/94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186 This Water Well Record was completed on (mo/day/yr) 8/5/94 under the business name of Kelly's Water Well Service, Inc. by (signature) [Signature] |  |                      |  |                |  |                 |  |              |  |
| 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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.                                                                                      |  |                      |  |                |  |                 |  |              |  |