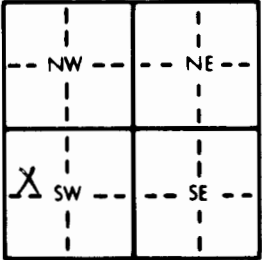


|  |    |   |                |                 |                    |
|--|----|---|----------------|-----------------|--------------------|
| 1 LOCATION OF WATER WELL:  |    | Fraction  | Section Number | Township Number | Range Number       |
| County: <u>Rego</u>  |    | <u>SW 1/4 NW 1/4 SW 1/4</u>   | <u>33</u>      | <u>T 22 S</u>   | <u>R 6 E</u>       |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>3612 Wilson Rd Hutchinson</u>  |    |   |                |                 |                    |
| 2 WATER WELL OWNER:  |    | Board of Agriculture, Division of Water Resources   |                |                 |                    |
| RR#, St. Address, Box # :  |    | Application Number:   |                |                 |                    |
| City, State, ZIP Code :  |    | <u>3612 Wilson Rd</u><br><u>Hutchinson Kan 67502</u>  |                |                 |                    |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:   |    | 4 DEPTH OF COMPLETED WELL: <u>30</u> ft. ELEVATION: .....   |                |                 |                    |
|    |    | Depth(s) Groundwater Encountered 1. <u>12</u> ft. 2. .... ft. 3. .... ft.   |                |                 |                    |
|  |    | WELL'S STATIC WATER LEVEL <u>12</u> ft. below land surface measured on mo/day/yr <u>8-20-91</u>                                 |                |                 |                    |
|  |    | Pump test data: Well water was <u>13</u> ft. after <u>1</u> hours pumping <u>20</u> gpm   |                |                 |                    |
|  |    | Est. Yield <u>75</u> gpm: Well water was .... ft. after .... hours pumping .... gpm   |                |                 |                    |
|  |    | Bore Hole Diameter <u>9</u> in. to <u>13</u> ft., and <u>6</u> in. to <u>30</u> 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 <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:   |    | CASING JOINTS: Glued <u>X</u> Clamped .....   |                |                 |                    |
| 1 Steel  |    | 5 Wrought iron  |                |                 |                    |
| ② PVC  |    | 8 Concrete tile   |                |                 |                    |
| 3 RMP (SR)   |    | 9 Other (specify below)   |                |                 |                    |
| 4 ABS  |    | Welded .....  |                |                 |                    |
| 6 Asbestos-Cement  |    | Threaded .....  |                |                 |                    |
| 7 Fiberglass   |    |   |                |                 |                    |
| Blank casing diameter <u>6</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>250</u>  |    |   |                |                 |                    |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  |    | ⑦ PVC   |                |                 |                    |
| 1 Steel  |    | 10 Asbestos-cement  |                |                 |                    |
| 3 Stainless steel  |    | 11 Other (specify) .....  |                |                 |                    |
| 5 Fiberglass   |    | 12 None used (open hole)  |                |                 |                    |
| 8 RMP (SR)   |    |   |                |                 |                    |
| 9 ABS  |    |   |                |                 |                    |
| SCREEN OR PERFORATION OPENINGS ARE:  |    | 5 Gauzed wrapped  |                |                 |                    |
| 1 Continuous slot  |    | 8 Saw cut   |                |                 |                    |
| 3 Mill slot  |    | 11 None (open hole)   |                |                 |                    |
| 2 Louvered shutter   |    | 6 Wire wrapped  |                |                 |                    |
| 4 Key punched  |    | ⑨ Drilled holes   |                |                 |                    |
|  |    | 7 Torch cut   |                |                 |                    |
|  |    | 10 Other (specify) .....  |                |                 |                    |
| SCREEN-PERFORATED INTERVALS:   |    | From <u>20</u> ft. to <u>30</u> ft., From .... ft. to .... ft.  |                |                 |                    |
|  |    | From .... ft. to .... ft., From .... ft. to .... ft.  |                |                 |                    |
| GRAVEL PACK INTERVALS:   |    | From .... ft. to .... 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 <u>3</u> ft. to <u>13</u> ft., From .... ft. to .... ft., From .... ft. to .... ft.  |    |   |                |                 |                    |
| What is the nearest source of possible contamination:  |    | 10 Livestock pens   |                |                 |                    |
| ① Septic tank  |    | 14 Abandoned water well   |                |                 |                    |
| 4 Lateral lines  |    | 11 Fuel storage   |                |                 |                    |
| 7 Pit privy  |    | 15 Oil well/Gas well  |                |                 |                    |
| 2 Sewer lines  |    | 12 Fertilizer storage   |                |                 |                    |
| 5 Cess pool  |    | 16 Other (specify below)  |                |                 |                    |
| 8 Sewage lagoon  |    |   |                |                 |                    |
| 3 Watertight sewer lines   |    | 13 Insecticide storage  |                |                 |                    |
| 6 Seepage pit  |    | 9 Feedyard  |                |                 |                    |
| Direction from well? <u>East</u>   |    | How many feet? <u>100</u>   |                |                 |                    |
| FROM   | TO | LITHOLOGIC LOG  | FROM           | TO              | PLUGGING INTERVALS |
| 0  | 2  | Sandy soil  |                |                 |                    |
| 2  | 7  | Sandy clay  |                |                 |                    |
| 7  | 11 | fine sand   |                |                 |                    |
| 11   | 14 | fine gravel   |                |                 |                    |
| 14   | 30 | medium 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) <u>8-20-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>193</u> This Water Well Record was completed on (mo/day/yr) <u>6-15-92</u> under the business name of <u>Price Water Well Serv.</u> by (signature) <u>John Davenport</u> |    |   |                |                 |                    |
| 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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.  |    |   |                |                 |                    |

OFFICE USE ONLY

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