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|-------------------------------------------------------------------------------------|--|-------------------------------------------|------------------------------------------------|-----------------|---------------|
| LOCATION OF WATER WELL                                                              |  | Fraction                                  | Section Number                                 | Township Number | Range Number  |
| County: <b>HARVEY</b>                                                               |  | <b>NE</b> 1/4 <b>NE</b> 1/4 <b>NW</b> 1/4 | <b>4</b>                                       | T <b>24</b> S   | R <b>1</b> EW |
| Distance and direction from nearest town or city? <b>9 30 - 3/4 West of HEUSTON</b> |  |                                           | Street address of well if located within city? |                 |               |

  

|                                                 |  |                                                   |
|-------------------------------------------------|--|---------------------------------------------------|
| WATER WELL OWNER: <b>MIRVIN STEIN</b>           |  | Board of Agriculture, Division of Water Resources |
| RR#, St. Address, Box #: <b>R.2. # 1</b>        |  | Application Number:                               |
| City, State, ZIP Code: <b>SEDGWICK KS 67135</b> |  |                                                   |

  

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| DEPTH OF COMPLETED WELL: <b>78</b> ft. Bore Hole Diameter: <b>11</b> in. to <b>78</b> ft. and <b>11</b> in. to <b>78</b> ft.                                         |                                                                                                                                                                                                                                                                                                                                                                                                   |
| Well Water to be used as:                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                   |
| <input checked="" type="checkbox"/> Domestic<br><input type="checkbox"/> 3 Feedlot<br><input type="checkbox"/> 2 Irrigation<br><input type="checkbox"/> 4 Industrial | <input type="checkbox"/> 5 Public water supply<br><input type="checkbox"/> 6 Oil field water supply<br><input type="checkbox"/> 7 Lawn and garden only<br><input type="checkbox"/> 8 Air conditioning<br><input type="checkbox"/> 9 Dewatering<br><input type="checkbox"/> 10 Observation well<br><input type="checkbox"/> 11 Injection well<br><input type="checkbox"/> 12 Other (Specify below) |
| Well's static water level: <b>45</b> ft. below land surface measured on <b>4</b> month <b>25</b> day <b>81</b> year                                                  |                                                                                                                                                                                                                                                                                                                                                                                                   |
| Pump Test Data                                                                                                                                                       | Well water was <b>48</b> ft. after <b>1 1/2</b> hours pumping <b>18</b> gpm                                                                                                                                                                                                                                                                                                                       |
| Est. Yield <b>50 +</b> gpm                                                                                                                                           | Well water was <b>48</b> ft. after <b>1 1/2</b> hours pumping <b>18</b> gpm                                                                                                                                                                                                                                                                                                                       |

  

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| TYPE OF BLANK CASING USED:                                                                                                                                        |                                                                                                                                                                                                                   | Casing Joints: Glued <input checked="" type="checkbox"/> Clamped                                                                                                                                                                                |
| <input type="checkbox"/> 1 Steel<br><input checked="" type="checkbox"/> 2 PVC<br><input type="checkbox"/> 3 RMP (SR)<br><input type="checkbox"/> 4 ABS            | <input type="checkbox"/> 5 Wrought iron<br><input type="checkbox"/> 6 Asbestos-Cement<br><input type="checkbox"/> 7 Fiberglass                                                                                    | <input type="checkbox"/> 8 Concrete tile<br><input type="checkbox"/> 9 Other (specify below)<br><input type="checkbox"/> 10 Asbestos-cement<br><input type="checkbox"/> 11 Other (specify)<br><input type="checkbox"/> 12 None used (open hole) |
| Blank casing dia: <b>5</b> in. to <b>58</b> ft. Dia: <b>58</b> in. to <b>58</b> ft. Dia: <b>58</b> in. to <b>58</b> ft.                                           |                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                 |
| Casing height above land surface: <b>18</b> in., weight <b>2.37</b> lbs./ft. Wall thickness or gauge No. <b>214</b>                                               |                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                 |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                           |                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> 1 Steel<br><input type="checkbox"/> 2 Brass<br><input type="checkbox"/> 3 Stainless steel<br><input type="checkbox"/> 4 Galvanized steel | <input type="checkbox"/> 5 Fiberglass<br><input type="checkbox"/> 6 Concrete tile<br><input type="checkbox"/> 7 Gauzed wrapped<br><input type="checkbox"/> 8 Wire wrapped<br><input type="checkbox"/> 9 Torch cut | <input checked="" type="checkbox"/> 7 PVC<br><input type="checkbox"/> 8 RMP (SR)<br><input type="checkbox"/> 9 ABS<br><input type="checkbox"/> 10 Saw cut <b>factory</b><br><input type="checkbox"/> 11 None (open hole)                        |
| Screen or Perforation Openings Are:                                                                                                                               |                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> 1 Continuous slot<br><input type="checkbox"/> 2 Louvered shutter                                                                         | <input type="checkbox"/> 3 Mill slot<br><input type="checkbox"/> 4 Key punched                                                                                                                                    | <input type="checkbox"/> 5 Gauzed wrapped<br><input type="checkbox"/> 6 Wire wrapped<br><input type="checkbox"/> 7 Torch cut                                                                                                                    |
| Screen-Perforation Dia: <b>5</b> in. to <b>78</b> ft. Dia: <b>78</b> in. to <b>78</b> ft. Dia: <b>78</b> in. to <b>78</b> ft.                                     |                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                 |
| Screen-Perforated Intervals: From <b>58</b> ft. to <b>78</b> ft. From <b>58</b> ft. to <b>78</b> ft. From <b>58</b> ft. to <b>78</b> ft.                          |                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                 |
| Gravel Pack Intervals: From <b>10</b> ft. to <b>78</b> ft. From <b>10</b> ft. to <b>78</b> ft. From <b>10</b> ft. to <b>78</b> ft.                                |                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                 |

  

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| GROUT MATERIAL:                                                                                                                                                                                                                                                           |                                                                                                                        | 1 Neat cement                                                                                                                 | 2 Cement grout                                                                                                                                                                                      | <input checked="" type="checkbox"/> 3 Bentonite                                                                                                                   | 4 Other |
| Grouted Intervals: From <b>0</b> ft. to <b>10</b> ft. From <b>10</b> ft. to <b>10</b> ft. From <b>10</b> ft. to <b>10</b> ft.                                                                                                                                             |                                                                                                                        |                                                                                                                               |                                                                                                                                                                                                     |                                                                                                                                                                   |         |
| What is the nearest source of possible contamination:                                                                                                                                                                                                                     |                                                                                                                        |                                                                                                                               |                                                                                                                                                                                                     |                                                                                                                                                                   |         |
| <input type="checkbox"/> 1 Septic tank<br><input type="checkbox"/> 2 Sewer lines<br><input type="checkbox"/> 3 Lateral lines                                                                                                                                              | <input type="checkbox"/> 4 Cess pool<br><input type="checkbox"/> 5 Seepage pit<br><input type="checkbox"/> 6 Pit privy | <input type="checkbox"/> 7 Sewage lagoon<br><input type="checkbox"/> 8 Feed yard<br><input type="checkbox"/> 9 Livestock pens | <input type="checkbox"/> 10 Fuel storage<br><input type="checkbox"/> 11 Fertilizer storage<br><input type="checkbox"/> 12 Insecticide storage<br><input type="checkbox"/> 13 Watertight sewer lines | <input checked="" type="checkbox"/> 14 Abandoned water well<br><input type="checkbox"/> 15 Oil well/Gas well<br><input type="checkbox"/> 16 Other (specify below) |         |
| Direction from well: <b>NE</b> How many feet: <b>15</b> ? Water Well Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                     |                                                                                                                        |                                                                                                                               |                                                                                                                                                                                                     |                                                                                                                                                                   |         |
| Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, date sample was submitted: month day year: Pump installed? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |                                                                                                                        |                                                                                                                               |                                                                                                                                                                                                     |                                                                                                                                                                   |         |
| 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                                                                                                                                                                                         |                                                                                                                        |                                                                                                                               |                                                                                                                                                                                                     |                                                                                                                                                                   |         |

  

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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> (1) constructed, <input type="checkbox"/> (2) reconstructed, or <input type="checkbox"/> (3) plugged under my jurisdiction and was completed on <b>4</b> month <b>25</b> day <b>81</b> year |  |  |  |  |  |
| and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>175</b>                                                                                                                                                                          |  |  |  |  |  |
| This Water Well Record was completed on <b>6</b> month <b>1</b> day <b>39</b> year under the business name of <b>PAUL'S INC</b> by (signature) <b>Paul Bunkert</b>                                                                                                                             |  |  |  |  |  |

  

|                                                    |  |      |    |                           |  |                |  |      |  |    |  |                |  |
|----------------------------------------------------|--|------|----|---------------------------|--|----------------|--|------|--|----|--|----------------|--|
| LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: |  | FROM |    | TO                        |  | LITHOLOGIC LOG |  | FROM |  | TO |  | LITHOLOGIC LOG |  |
|                                                    |  | 0    | 5  | Loam to clay              |  |                |  |      |  |    |  |                |  |
|                                                    |  | 5    | 35 | Red br. clay              |  |                |  |      |  |    |  |                |  |
|                                                    |  | 35   | 40 | SANDY clay - fine / soft  |  |                |  |      |  |    |  |                |  |
|                                                    |  | 40   | 48 | Grey clay - gritty        |  |                |  |      |  |    |  |                |  |
|                                                    |  | 48   | 78 | SAND - med fine to coarse |  |                |  |      |  |    |  |                |  |
|                                                    |  |      |    |                           |  |                |  |      |  |    |  |                |  |
|                                                    |  |      |    |                           |  |                |  |      |  |    |  |                |  |
|                                                    |  |      |    |                           |  |                |  |      |  |    |  |                |  |
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|                                  |        |        |        |
|----------------------------------|--------|--------|--------|
| ELEVATION:                       |        |        |        |
| Depth(s) Groundwater Encountered | 1. ft. | 2. ft. | 3. 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.