

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    |                                                                                                                                                                                                  |                |                 |                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------|-----------------------|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                                                                   |    | Fraction                                                                                                                                                                                         | Section Number | Township Number | Range Number          |
| County: <u>Sedgwick</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    | <u>NW 32 1/4 32 1/4</u>                                                                                                                                                                          | <u>13</u>      | T <u>25</u> S   | R <u>2</u> E <u>W</u> |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>1 E. 1 So. 3/4 E. Bentley, KS.</u>                                                                                                                                                                                                                                                                                                                                    |    |                                                                                                                                                                                                  |                |                 |                       |
| 2 WATER WELL OWNER: <u>Leon Black</u>                                                                                                                                                                                                                                                                                                                                                                                                                                       |    |                                                                                                                                                                                                  |                |                 |                       |
| RR#, St. Address, Box #: <u>R#1</u>                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |                                                                                                                                                                                                  |                |                 |                       |
| City, State, ZIP Code: <u>Bentley, KS.</u>                                                                                                                                                                                                                                                                                                                                                                                                                                  |    |                                                                                                                                                                                                  |                |                 |                       |
| Board of Agriculture, Division of Water Resources<br>Application Number:                                                                                                                                                                                                                                                                                                                                                                                                    |    |                                                                                                                                                                                                  |                |                 |                       |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                                                        |    | 4 DEPTH OF COMPLETED WELL: <u>80</u> ft. ELEVATION:                                                                                                                                              |                |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    | Depth(s) Groundwater Encountered 1. <u>16</u> ft. 2. <u>16</u> ft. 3. <u>16</u> ft.                                                                                                              |                |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    | WELL'S STATIC WATER LEVEL <u>16</u> ft. below land surface measured on mo/day/yr <u>5-12-82</u>                                                                                                  |                |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    | Pump test data: Well water was <u>25</u> ft. after <u>1/2</u> hours pumping <u>200</u> gpm                                                                                                       |                |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    | Est. Yield <u>400-500</u> gpm; Well water was <u>25</u> ft. after <u>1/2</u> hours pumping <u>200</u> gpm                                                                                        |                |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    | Bore Hole Diameter <u>16</u> in. to <u>16</u> ft. and <u>16</u> in. to <u>16</u> ft.                                                                                                             |                |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    | WELL WATER TO BE USED AS:                                                                                                                                                                        |                |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    | 1 Domestic      3 Feedlot      6 Oil field water supply      9 Dewatering      12 Other (Specify below)<br><u>2 Irrigation</u> 4 Industrial      7 Lawn and garden only      10 Observation well |                |                 |                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    | Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> ; 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:                                                                                                                                                                                                                                                                                                                                                                                                                                                |    |                                                                                                                                                                                                  |                |                 |                       |
| 1 Steel      3 RMP (SR)      5 Wrought iron      8 Concrete tile      CASING JOINTS: Glued <u>X</u> Clamped <u>X</u><br><u>2 PVC</u> 4 ABS      6 Asbestos-Cement      9 Other (specify below)      Welded <u>X</u><br>Blank casing diameter <u>5</u> in. to <u>20</u> ft., Dia <u>20</u> in. to <u>20</u> ft., Dia <u>20</u> in. to <u>20</u> ft.<br>Casing height above land surface <u>12</u> in., weight <u>2.26</u> lbs./ft. Wall thickness or gauge No. <u>See 40</u> |    |                                                                                                                                                                                                  |                |                 |                       |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                                     |    |                                                                                                                                                                                                  |                |                 |                       |
| 1 Steel      3 Stainless steel      5 Fiberglass      8 RMP (SR)      10 Asbestos-cement<br>2 Brass      4 Galvanized steel      6 Concrete tile      9 ABS      11 Other (specify) <u>25</u><br>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)<br>2 Louvered shutter      4 Key punched      6 Wire wrapped      9 Drilled holes.<br>7 Torch cut      10 Other (specify)                                                                                                                                                                                                                                                  |    |                                                                                                                                                                                                  |                |                 |                       |
| SCREEN-PERFORATED INTERVALS: From <u>20</u> ft. to <u>80</u> ft., From <u>20</u> ft. to <u>80</u> ft., From <u>20</u> ft. to <u>80</u> ft.                                                                                                                                                                                                                                                                                                                                  |    |                                                                                                                                                                                                  |                |                 |                       |
| GRAVEL PACK INTERVALS: From <u>15</u> ft. to <u>80</u> ft., From <u>15</u> ft. to <u>80</u> ft., From <u>15</u> ft. to <u>80</u> ft.                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                                                                                                                  |                |                 |                       |
| 6 GROUT MATERIAL: 1 Neat cement      2 Cement grout      3 Bentonite      4 Other                                                                                                                                                                                                                                                                                                                                                                                           |    |                                                                                                                                                                                                  |                |                 |                       |
| Grout Intervals: From <u>0</u> ft. to <u>15</u> ft., From <u>15</u> ft. to <u>80</u> ft., From <u>15</u> ft. to <u>80</u> ft., From <u>15</u> ft. to <u>80</u> 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<br>2 Sewer lines      5 Cess pool      8 Sewage lagoon      11 Fuel storage      15 Oil well/Gas well<br>3 Watertight sewer lines      6 Seepage pit      9 Feedyard      12 Fertilizer storage      16 Other (specify below)<br>13 Insecticide storage                                                                                                             |    |                                                                                                                                                                                                  |                |                 |                       |
| Direction from well? <u>NO NE</u>                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |                                                                                                                                                                                                  |                |                 |                       |
| How many feet?                                                                                                                                                                                                                                                                                                                                                                                                                                                              |    |                                                                                                                                                                                                  |                |                 |                       |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | TO | LITHOLOGIC LOG                                                                                                                                                                                   | FROM           | TO              | LITHOLOGIC LOG        |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 2  | Top Soil                                                                                                                                                                                         |                |                 |                       |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 12 | Red Clay                                                                                                                                                                                         |                |                 |                       |
| 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 24 | med. Sand                                                                                                                                                                                        |                |                 |                       |
| 24                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 26 | Red Clay                                                                                                                                                                                         |                |                 |                       |
| 26                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 45 | med. Sand                                                                                                                                                                                        |                |                 |                       |
| 45                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 62 | GRAY CLAY                                                                                                                                                                                        |                |                 |                       |
| 62                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 80 | med. SAND                                                                                                                                                                                        |                |                 |                       |
| 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>5-12-82</u> and this record is true to the best of my knowledge and belief. Kansas                                                                                                                                                                                                          |    |                                                                                                                                                                                                  |                |                 |                       |
| Water Well Contractor's License No. <u>318</u> This Water Well Record was completed on (mo/day/yr) <u>5-12-82</u>                                                                                                                                                                                                                                                                                                                                                           |    |                                                                                                                                                                                                  |                |                 |                       |
| under the business name of <u>WENINGER DRILLING</u> by signature <u>[Signature]</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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.                                                                                                        |    |                                                                                                                                                                                                  |                |                 |                       |

OFFICE USE ONLY

T

R

END

SEC.

13

NW 1/4 SE 1/4 SE 1/4