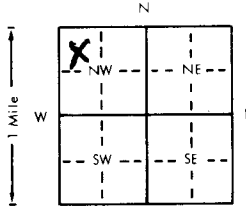


OFFICE USE ONLY  
T  
26  
R  
16  
EW  
SEC

C 1/4 NW 1/4 NW 1/4

|   |  |  |  |                |  |                    |                 |   |              |                                |  |                |  |
|---|--|--|--|----------------|--|--------------------|-----------------|---|--------------|--------------------------------|--|----------------|--|
| 1. LOCATION OF WATER WELL   |  | Fraction   |  |                | Section Number                                 |                    | Township Number |   | Range Number |                                |  |                |  |
| County: <u>Edwards</u>  |  | C 1/4 NW 1/4 NW 1/4  |  |                | 3  |                    | T 26 S          |   | R 16W EW     |                                |  |                |  |
| Distance and direction from nearest town or city?<br><u>1 1/2 S, 1 E, 3/4 N of Trousdale, Kansas</u>  |  |  |  |                | Street address of well if located within city? |                    |                 |   |              |                                |  |                |  |
| 2. WATER WELL OWNER:  |  | <u>Big Springs Drilling</u>  |  |                |  |                    |                 |   |              |                                |  |                |  |
| RR#, St. Address, Box # :   |  | <u>Box 8287, Munger Station</u>  |  |                |  |                    |                 | Board of Agriculture, Division of Water Resources       |              |                                |  |                |  |
| City, State, ZIP Code :   |  | <u>Wichita, Kansas 67208</u>   |  |                |  |                    |                 | Application Number: <u>Unknown</u>                      |              |                                |  |                |  |
| 3. DEPTH OF COMPLETED WELL  |  | <u>65</u> ft. Bore Hole Diameter <u>8</u> in. to <u>65</u> 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 <u>Oil field water supply</u>  |  |                | 9 Dewatering                                   |                    |                 | 12 Other (Specify below)                                |              |                                |  |                |  |
| 2 Irrigation 4 Industrial   |  | 7 <u>Lawn and garden only</u>  |  |                | 10 Observation well                            |                    |                 |   |              |                                |  |                |  |
| Well's static water level   |  | <u>18</u> ft. below land surface measured on <u>9</u> month <u>29</u> day <u>1979</u> year                                 |  |                |  |                    |                 |   |              |                                |  |                |  |
| Pump Test Data  |  | Well water was . . . . . ft. after . . . . . hours pumping. . . . . gpm  |  |                |  |                    |                 |   |              |                                |  |                |  |
| Est. Yield <u>60</u> gpm:   |  | Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm   |  |                |  |                    |                 |   |              |                                |  |                |  |
| 4. TYPE OF BLANK CASING USED:   |  | 5 Wrought iron   |  |                | 8 Concrete tile                                |                    |                 | Casing Joints: <u>Glued</u> . . . . . Clamped . . . . . |              |                                |  |                |  |
| 1 Steel 3 RMP (SR)  |  | 6 Asbestos-Cement  |  |                | 9 Other (specify below)                        |                    |                 | Welded . . . . .  |              |                                |  |                |  |
| 2 PVC 4 ABS   |  | 7 Fiberglass   |  |                |  |                    |                 | Threaded. . . . .                                       |              |                                |  |                |  |
| Blank casing dia <u>5</u> in. to <u>45</u> ft., Dia   |  | in. to . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.                               |  |                |  |                    |                 |   |              |                                |  |                |  |
| Casing height above land surface  |  | <u>12</u> in., weight <u>2.8</u> lbs./ft. Wall thickness or gauge No. <u>Sch. 40</u>                                       |  |                |  |                    |                 |   |              |                                |  |                |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:   |  | 7 <u>PVC</u>   |  |                | 10 Asbestos-cement                             |                    |                 |   |              |                                |  |                |  |
| 1 Steel 3 Stainless steel   |  | 5 Fiberglass   |  |                | 8 <u>RMP (SR)</u>                              |                    |                 | 11 Other (specify) . . . . .                            |              |                                |  |                |  |
| 2 Brass 4 Galvanized steel  |  | 6 Concrete tile  |  |                | 9 ABS  |                    |                 | 12 None used (open hole)                                |              |                                |  |                |  |
| Screen or Perforation Openings Are:   |  | 5 Gauzed wrapped   |  |                | 8 <u>Saw cut</u>                               |                    |                 | 11 None (open hole)                                     |              |                                |  |                |  |
| 1 Continuous slot 3 Mill slot   |  | 6 Wire wrapped   |  |                | 9 <u>Drilled holes</u>                         |                    |                 |   |              |                                |  |                |  |
| 2 Louvered shutter 4 Key punched  |  | 7 Torch cut  |  |                | 10 Other (specify) . . . . .                   |                    |                 |   |              |                                |  |                |  |
| Screen-Perforation Dia <u>5</u> in. to . . . . . ft., Dia   |  | . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.                     |  |                |  |                    |                 |   |              |                                |  |                |  |
| Screen-Perforated Intervals:  |  | From <u>45</u> ft. to <u>65</u> ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.              |  |                |  |                    |                 |   |              |                                |  |                |  |
| Gravel Pack Intervals:  |  | From <u>10</u> ft. to <u>65</u> ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.              |  |                |  |                    |                 |   |              |                                |  |                |  |
| 5. GROUT MATERIAL:  |  | 1 Neat cement  |  | 2 Cement grout |  | 3 <u>Bentonite</u> |                 | 4 Other . . . . .                                       |              |                                |  |                |  |
| Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.   |  |  |  |                |  |                    |                 |   |              |                                |  |                |  |
| What is the nearest source of possible contamination:   |  | 7 Sewage lagoon  |  |                | 10 Fuel storage                                |                    |                 | 14 Abandoned water well                                 |              |                                |  |                |  |
| 1 Septic tank 4 Cess pool   |  | 8 Feed yard  |  |                | 11 Fertilizer storage                          |                    |                 | 15 <u>Oil well/Gas well</u>                             |              |                                |  |                |  |
| 2 Sewer lines 5 Seepage pit   |  | 9 Livestock pens   |  |                | 12 Insecticide storage                         |                    |                 | 16 Other (specify below)                                |              |                                |  |                |  |
| 3 Lateral lines 6 Pit privy   |  | 13 Watertight sewer lines  |  |                |  |                    |                 |   |              |                                |  |                |  |
| Direction from well <u>West</u> How many feet <u>60</u> ?   |  | Water Well Disinfected? Yes <u>No</u>  |  |                |  |                    |                 |   |              |                                |  |                |  |
| Was a chemical/bacteriological sample submitted to Department? Yes . . . . . No . . . . .   |  | If yes, date sample was submitted . . . . . month . . . . . day . . . . . year: Pump Installed? Yes . . . . . No . . . . . |  |                |  |                    |                 |   |              |                                |  |                |  |
| If 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        |  |                |  |
| 6. CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>September</u> month <u>29</u> day <u>1979</u> year <u>186</u>  |  | and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . . .         |  |                |  |                    |                 |   |              |                                |  |                |  |
| This Water Well Record was completed on <u>March</u> month <u>7</u> day <u>1980</u> year under the business name of <u>Kellys Water Well Service</u> by (signature) <u>Kelly Price</u>  |  |  |  |                |  |                    |                 |   |              |                                |  |                |  |
| 7. LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:   |  | FROM   |  | TO             |  | LITHOLOGIC LOG     |                 | FROM  |              | TO                             |  | LITHOLOGIC LOG |  |
|   |  | 0  |  | 35             |  | Clay               |                 |   |              |                                |  |                |  |
|   |  | 35   |  | 65             |  | Sand and gravel    |                 |   |              |                                |  |                |  |
|   |  |  |  |                |  |                    |                 |   |              |                                |  |                |  |
| ELEVATION: <u>Unknown</u>   |  |  |  |                |  |                    |                 |   |              |                                |  |                |  |
| Depth(s) Groundwater Encountered  |  | 1. <u>18</u> ft.   |  | 2. . . . . ft. |  | 3. . . . . ft.     |                 | 4. . . . . 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. |  |  |  |                |  |                    |                 |   |              |                                |  |                |  |