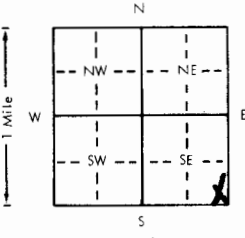


|                                                                                                                                                                                                                                                                                                                                                               |  |                             |                                                |                   |              |    |                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------|------------------------------------------------|-------------------|--------------|----|----------------|
| 1 LOCATION OF WATER WELL                                                                                                                                                                                                                                                                                                                                      |  | Fraction                    | Section Number                                 | Township Number   | Range Number |    |                |
| County: <u>Sedgwick</u>                                                                                                                                                                                                                                                                                                                                       |  | <u>SE 1/4 SE 1/4 SE 1/4</u> | <u>9</u>                                       | <u>T 26 S</u>     | <u>R 2 E</u> |    |                |
| Distance and direction from nearest town or city?                                                                                                                                                                                                                                                                                                             |  |                             | Street address of well if located within city? |                   |              |    |                |
| <u>1 No Colwich KS.</u>                                                                                                                                                                                                                                                                                                                                       |  |                             |                                                |                   |              |    |                |
| 2 WATER WELL OWNER:                                                                                                                                                                                                                                                                                                                                           |  |                             |                                                |                   |              |    |                |
| RR#, St. Address, Box # : <u>Kent Linnebur</u>                                                                                                                                                                                                                                                                                                                |  |                             |                                                |                   |              |    |                |
| City, State, ZIP Code : <u>Colwich KS 67030</u>                                                                                                                                                                                                                                                                                                               |  |                             |                                                |                   |              |    |                |
| Board of Agriculture, Division of Water Resources                                                                                                                                                                                                                                                                                                             |  |                             |                                                |                   |              |    |                |
| Application Number:                                                                                                                                                                                                                                                                                                                                           |  |                             |                                                |                   |              |    |                |
| 3 DEPTH OF COMPLETED WELL: <u>51</u> ft. Bore Hole Diameter: <u>11</u> in. to . . . . . ft., and . . . . . in. to . . . . . ft.                                                                                                                                                                                                                               |  |                             |                                                |                   |              |    |                |
| Well Water to be used as:                                                                                                                                                                                                                                                                                                                                     |  |                             |                                                |                   |              |    |                |
| 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well                                                                                                                                                                                                                                                                               |  |                             |                                                |                   |              |    |                |
| 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)                                                                                                                                                                                                                                                                      |  |                             |                                                |                   |              |    |                |
| 7 Lawn and garden only 10 Observation well                                                                                                                                                                                                                                                                                                                    |  |                             |                                                |                   |              |    |                |
| Well's static water level: <u>18</u> ft. below land surface measured on <u>3</u> month <u>8</u> day <u>80</u> year                                                                                                                                                                                                                                            |  |                             |                                                |                   |              |    |                |
| Pump Test Data: Well water was <u>20</u> ft. after <u>1/2</u> hours pumping <u>20</u> gpm                                                                                                                                                                                                                                                                     |  |                             |                                                |                   |              |    |                |
| Est. Yield <u>50</u> gpm: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm                                                                                                                                                                                                                                                            |  |                             |                                                |                   |              |    |                |
| 4 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                  |  |                             |                                                |                   |              |    |                |
| 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: <u>Glued</u> Clamped . . . . .                                                                                                                                                                                                                                                               |  |                             |                                                |                   |              |    |                |
| 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded . . . . .                                                                                                                                                                                                                                                                                        |  |                             |                                                |                   |              |    |                |
| 7 Fiberglass . . . . . Threaded . . . . .                                                                                                                                                                                                                                                                                                                     |  |                             |                                                |                   |              |    |                |
| Blank casing dia: <u>5</u> in. to <u>45</u> ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.                                                                                                                                                                                                                                       |  |                             |                                                |                   |              |    |                |
| Casing height above land surface: <u>12</u> in., weight <u>11.50</u> lbs./ft. Wall thickness or gauge No: <u>200</u>                                                                                                                                                                                                                                          |  |                             |                                                |                   |              |    |                |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                       |  |                             |                                                |                   |              |    |                |
| 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement                                                                                                                                                                                                                                                                                          |  |                             |                                                |                   |              |    |                |
| 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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-Perforation Dia: <u>5</u> in. to <u>51</u> ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.                                                                                                                                                                                                                                 |  |                             |                                                |                   |              |    |                |
| Screen-Perforated Intervals: From <u>45</u> ft. to <u>51</u> ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                    |  |                             |                                                |                   |              |    |                |
| Gravel Pack Intervals: From <u>16</u> ft. to <u>51</u> ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                          |  |                             |                                                |                   |              |    |                |
| 5 GROUT MATERIAL:                                                                                                                                                                                                                                                                                                                                             |  |                             |                                                |                   |              |    |                |
| 1 Neat cement 2 Cement grout 3 Bentonite 4 Other . . . . .                                                                                                                                                                                                                                                                                                    |  |                             |                                                |                   |              |    |                |
| Grouted Intervals: From <u>6</u> ft. to <u>16</u> ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                               |  |                             |                                                |                   |              |    |                |
| What is the nearest source of possible contamination:                                                                                                                                                                                                                                                                                                         |  |                             |                                                |                   |              |    |                |
| 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well                                                                                                                                                                                                                                                                             |  |                             |                                                |                   |              |    |                |
| 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well                                                                                                                                                                                                                                                                            |  |                             |                                                |                   |              |    |                |
| 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)                                                                                                                                                                                                                                                                  |  |                             |                                                |                   |              |    |                |
| 13 Watertight sewer lines                                                                                                                                                                                                                                                                                                                                     |  |                             |                                                |                   |              |    |                |
| Direction from well: <u>80 West</u> How many feet: <u>80</u> ? Water Well Disinfected? <u>Yes</u> No                                                                                                                                                                                                                                                          |  |                             |                                                |                   |              |    |                |
| Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> If yes, date sample                                                                                                                                                                                                                                                              |  |                             |                                                |                   |              |    |                |
| was submitted . . . . . month . . . . . day . . . . . year: Pump Installed? Yes <u>No</u>                                                                                                                                                                                                                                                                     |  |                             |                                                |                   |              |    |                |
| 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>3</u> month <u>8</u> day <u>80</u> year                                                                                                                                                                                                                                                                                                       |  |                             |                                                |                   |              |    |                |
| 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 <u>29</u> month <u>6</u> day <u>1980</u> year under the business                                                                                                                                                                                                                                                      |  |                             |                                                |                   |              |    |                |
| name of <u>Wminger Drilling</u> by (signature) <u>Wminger</u>                                                                                                                                                                                                                                                                                                 |  |                             |                                                |                   |              |    |                |
| 7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                          |  | FROM                        | TO                                             | LITHOLOGIC LOG    | FROM         | TO | LITHOLOGIC LOG |
|                                                                                                                                                                                                                                                                             |  | <u>0</u>                    | <u>2</u>                                       | <u>Top 50'</u>    |              |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  | <u>2</u>                    | <u>18</u>                                      | <u>Red clay</u>   |              |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  | <u>18</u>                   | <u>32</u>                                      | <u>Fine sand</u>  |              |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  | <u>32</u>                   | <u>33</u>                                      | <u>Red clay</u>   |              |    |                |
|                                                                                                                                                                                                                                                                                                                                                               |  | <u>33</u>                   | <u>51</u>                                      | <u>med gravel</u> |              |    |                |
| ELEVATION:                                                                                                                                                                                                                                                                                                                                                    |  |                             |                                                |                   |              |    |                |
| Depth(s) Groundwater Encountered 1. . . . . 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. |  |                             |                                                |                   |              |    |                |

OFFICE USE ONLY

T 26

R

E 2

SEC 9

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