

1 LOCATION OF WATER WELL:		Fraction <u>NW 1/4 NW 1/4 SW 1/4</u>		Section Number <u>11</u>		Township Number <u>T 26 S</u>		Range Number <u>R 2 E</u>																																											
County <u>Sedgwick</u>																																																			
Distance and direction from nearest town or city street address of well if located within city? <u>SEE Below.</u>																																																			
2 WATER WELL OWNER: <u>DON LINDBERGH West.</u>																																																			
RR#, St. Address, Box # : <u>6550 No 151st West.</u>						Board of Agriculture, Division of Water Resources																																													
City, State, ZIP Code : <u>Cotwich, KS 67030</u>						Application Number:																																													
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL: <u>65</u> ft. ELEVATION: <u>65</u> ft.																																																
			Depth(s) Groundwater Encountered 1. <u>22</u> ft. 2. <u>22</u> ft. 3. <u>22</u> ft.																																																
			WELL'S STATIC WATER LEVEL <u>22</u> ft. below land surface measured on mo/day/yr <u>5-1-90</u>																																																
			Pump test data: Well water was <u>22</u> ft. after <u>20</u> hours pumping <u>20</u> gpm																																																
			Est. Yield <u>70</u> gpm: Well water was <u>22</u> ft. after <u>20</u> hours pumping <u>20</u> gpm																																																
			Bore Hole Diameter <u>11</u> in. to <u>65</u> ft., and <u>65</u> in. to <u>65</u> ft.																																																
WELL WATER TO BE USED AS:																																																			
☒ 1 Domestic ☐ 3 Feedlot ☐ 6 Oil field water supply ☐ 9 Dewatering ☐ 12 Other (Specify below) ☐ 2 Irrigation ☐ 4 Industrial ☐ 7 Lawn and garden only ☐ 10 Monitoring well																																																			
Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> No <u>X</u> ; If yes, mo/day/yr sample was submitted																																																			
Water Well Disinfected? Yes <u>X</u> No <u>X</u>																																																			
5 TYPE OF BLANK CASING USED:																																																			
☒ 1 Steel ☐ 3 RMP (SR) ☐ 5 Wrought iron ☐ 8 Concrete tile CASING JOINTS: ☒ Glued ☐ Clamped ☒ 2 PVC ☐ 4 ABS ☐ 6 Asbestos-Cement ☐ 9 Other (specify below) ☐ Welded ☐ Blank casing diameter <u>5</u> in. to <u>53</u> ft., Dia <u>53</u> in. to <u>53</u> ft., Dia <u>53</u> in. to <u>53</u> ft.																																																			
Casing height above land surface <u>12</u> in., weight <u>2.40</u> lbs./ft. Wall thickness or gauge No <u>SDR-26</u>																																																			
TYPE OF SCREEN OR PERFORATION MATERIAL:																																																			
☐ 1 Steel ☐ 3 Stainless steel ☐ 5 Fiberglass ☒ 8 RMP (SR) ☐ 11 Other (specify) ☐ 2 Brass ☐ 4 Galvanized steel ☐ 6 Concrete tile ☐ 9 ABS ☐ 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-PERFORATED INTERVALS: From <u>53</u> ft. to <u>65</u> ft., From <u>53</u> ft. to <u>65</u> ft., From <u>53</u> ft. to <u>65</u> ft.																																																			
GRAVEL PACK INTERVALS: From <u>22</u> ft. to <u>65</u> ft., From <u>22</u> ft. to <u>65</u> ft., From <u>22</u> ft. to <u>65</u> ft.																																																			
6 GROUT MATERIAL:																																																			
☐ 1 Neat cement ☒ 2 Cement grout ☐ 3 Bentonite ☐ 4 Other Grout Intervals: From <u>3</u> ft. to <u>23</u> ft., From <u>3</u> ft. to <u>23</u> ft., From <u>3</u> ft. to <u>23</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 ☐ 2 Sewer lines ☐ 5 Cess pool ☒ 8 Sewage lagoon ☐ 11 Fuel storage ☐ 15 Oil well/Gas well ☐ 3 Watertight sewer lines ☐ 6 Seepage pit ☐ 9 Feedyard ☐ 12 Fertilizer storage ☐ 16 Other (specify below) ☐ 13 Insecticide storage																																																			
Direction from well? <u>NE</u> How many feet? <u>130</u>																																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>2</td> <td>Top soi</td> <td>47</td> <td>65</td> <td>fine to med SAND</td> </tr> <tr> <td>2</td> <td>19</td> <td>Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>19</td> <td>31</td> <td>fine SAND</td> <td></td> <td></td> <td></td> </tr> <tr> <td>31</td> <td>32</td> <td>Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>32</td> <td>35</td> <td>SAND</td> <td></td> <td></td> <td></td> </tr> <tr> <td>35</td> <td>47</td> <td>Clay</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	2	Top soi	47	65	fine to med SAND	2	19	Clay				19	31	fine SAND				31	32	Clay				32	35	SAND				35	47	Clay			
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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>5-1-90</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>5-1-90</u> under the business name of <u>Weninger Dull</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 two copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																																			