

1 LOCATION OF WATER WELL: County: Reno Fraction: SW 1/4 SW 1/4 SE 1/4 Section Number: 12 Township Number: 26 Range Number: 4 E/W

Distance and direction from nearest town or city street address of well if located within city? 1/2 mile West of Sedgwick-Reno County line on Amdale Rd

2 WATER WELL OWNER: Larry Bender RR#, St. Address, Box #: RTF City, State, ZIP Code: Amdale Kans. Board of Agriculture, Division of Water Resources Application Number: _____

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL: 105 ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1. 30 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 30.30 ft. below land surface measured on mo/day/yr 10-20-90

Pump test data: Well water was 65 ft. after 4 hours pumping 15 gpm

Est. Yield 15 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter 8 in. to 36 in. and 5 in. to 105 in.

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

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 No If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes No

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 5 in. to 36 in. Dia. _____ in. to _____ in. Dia. _____ in. to _____ in. Dia. _____ in. to _____ in. Dia. _____

Casing height above land surface 18 in., weight SDR 26 lbs./ft. Wall thickness or gauge No. _____

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 _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Intervals: From 0 ft. to 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ 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? West How many feet? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>36</u>	<u>Gravel</u>			
<u>36</u>	<u>105</u>	<u>Shale</u>			

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) 10-20-90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 9988 This Water Well Record was completed on (mo/day/yr) 10-23-91 under the business name of Paul Vincent Sen by (signature) Paul Vincent Sen

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, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.