WATER WELL R			sion of Water urces App. No.	15,907	Well ID #3	
Original Record 1 LOCATION OF V		and the second parameters of the second	ion Number	Township Numb	per Range Number	
County: Kingman	0117 21177 0117		32	T 27 S	R 10 DE W	
2 WELL OWNER:					(if unknown, distance and	
Business: City of Cunningham direction from nearest town or intersection): If at owner's address, check here:						
Address: P.O. Box 188 Located at 401 W. Third St. in Cunningham.					,	
Address: City: Cunningham State: KS ZIP: 67035						
3 LOCATE WELL						
WITH "X" IN	4 DEPTH OF COMPLETED WELL:		5 Latitude		(decimal degrees)	
SECTION BOX:	Depth(s) Groundwater Encountered: 1)	ft.	Longitud	e: -98.43 <u>6368</u>	(decimal degrees)	
N	2) ft. 3) ft., or 4) [WELL'S STATIC WATER LEVEL: 16.			Horizontal Datum. ☐ WGS 84 ☐ NAD 83 🛮 NAD 27		
	below land surface, measured on (mo-da		Source for Latitude/Longitude .			
NWNE	above land surface, measured on (mo-da		(WAAS enabled? ▼ Yes No)			
w	ft.	Land Survey Topographic Map				
	gpm	Online Mapper:				
SWSE	Well water was	ft.				
	after hours pumping	gpm	6 Elevation	n: Unknown ft	. Ground Level TOC	
S	J Estimated Yield: gpm Bore Hole Diameter: 24 in. to 103	ft. and			GPS Topographic Map	
1 mile	in to	ft.		Other		
7 WELL WATER TO BE USED AS:						
1. Domestic:	5. Nublic Water Supply: well ID	#3	10. 🔲 Oil F	ield Water Supply: le	ease	
Household	6. Dewatering: how many wells?		11. Test Hol			
1 =	Lawn & Garden 7. Aquifer Recharge: well ID					
	Livestock 8. Monitoring: well ID			12. Geothermal: how many bores?		
2. ☐ Irrigation 3. ☐ Feedlot	☐ Irrigation 9. Environmental Remediation: well ID ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction			a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water		
4. Industrial	Recovery Injection	r Extraction	13. Other		ischarge inj. of water	
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:						
Water well disinfected? \(\text{Yes} \square \text{No} \)						
8 TYPE OF CASING USED: Steel PVC CASING JOINTS: Glued Clamped Welded Threaded Other						
Casing diameter 12 in. to 79 ft., Diameter in. to ft., Diameter in. to ft.						
Casing height above land surface 12 in. Weight 18.89 lbs./ft. Wall thickness or gauge No750						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
Steel Stainless Steel Fiberglass PVC Other (Specify)						
Brass Galvanized Steel Concrete tile None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:						
Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)						
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)						
SCREEN-PERFORATED INTERVALS: From 79 ft. to 102 ft., From ft. to ft., From ft. to ft.						
GRAVEL PACK	INTERVALS: From 70 ft. to 103 ft.	, From	ft. to	ft., From	ft. to ft.	
9 GROUT MATERIAL: Neat cement						
Grout Intervals: From 5 ft. to 26 ft., From 26 ft. to 70 ft., From ft. to ft.						
Nearest source of possi			ivestock Pens	☐ Incontin	iida Staraga	
Sewer Lines	☐ Lateral Lines ☐ Pit Privy ☐ Cess Pool ☐ Sewage L		uel Storage		ride Storage oned Water Well	
Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well						
Other (Specify) None Known						
Direction from well?	Distance from w	ell?	ft.			
10 FROM TO	LITHOLOGIC LOG	FROM	TO LI	THO. LOG (cont.) or	r PLUGGING INTERVALS	
4 10	Topsoil					
10 10 14	Clay & caliche					
14 20	Sand & gravel, fine to coarse Clay, brown, white					
20 35	Cemented sand, very hard, clay and fine sand	-				
35 56	Sand & gravel, fine to medium		-			
56 58	Clay, brown and gray	Notes:				
58 102	Sand & gravel, fine, thin clay streaks	1,000				
102 103 Red shale						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \(\simega\) constructed, \(\simega\) reconstructed, or \(\simega\) plugged						
under my jurisdiction and was completed on (mo-day-year) 05-05-20 and this record is true to the best of my knowledge and belief.						
Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo-day-year) 05-08-20						
under the business name of Clarke Well & Equipment, Inc. Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section,						
1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.						
Visit us at http://www.kdheks.izov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015						