

1 LOCATION OF WATER WELL: County: **DEATH** Fraction: **SE 1/4 SW 1/4 SE 1/4** Section Number: **29** Township Number: **T 27 S** Range Number: **R 11 E 0**

Distance and direction from nearest town or city street address of well if located within city?  
**From Cunningham 2 West of 54th Hwy 2 1/2 north on West side of Rd**

2 WATER WELL OWNER: **Peggy Perdue / Dave Steffen POA**  
 RR#, St. Address, Box #: **617 New South Ave**  
 City, State, ZIP Code: **Cunningham, KS 80**

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: **80** ft. ELEVATION: \_\_\_\_\_ ft.

Depth(s) Groundwater Encountered \_\_\_\_\_ ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL **1A** \_\_\_\_\_ ft. below land surface measured on mo/day/yr

Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

Est. Yield \_\_\_\_\_ gpm Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

Bore Hole Diameter: **8** in. to **80** in. to \_\_\_\_\_ in. to \_\_\_\_\_ in. to \_\_\_\_\_ ft.

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 |
| 2 Irrigation          | 4 Industrial       | 7 Lawn and garden only   |
|                       |                    | 10 Dewatering            |
|                       |                    | 12 Other (Specify below) |

Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No **X**; If yes, mo/day/yr sample was submitted \_\_\_\_\_

Water Well Disinfected? Yes **X** No \_\_\_\_\_

5 TYPE OF BLANK CASING USED:

|                  |            |                   |                         |  |
|------------------|------------|-------------------|-------------------------|--|
| <b>X</b> 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 _____                             |
|                  |            | 7 Fiberglass      |                         | Threaded _____                           |

Blank casing diameter \_\_\_\_\_ in. to **80** in. Dia \_\_\_\_\_ in. to \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Casing height above land surface \_\_\_\_\_ in. weight **160** lbs./ft. Wall thickness or gauge No. \_\_\_\_\_

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 | <b>X</b> 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 **80** ft. to **60** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From **80** ft. to **21** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout **X** 3 Bentonite 4 Other \_\_\_\_\_

Grout intervals: From **21** ft. to **0** 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? \_\_\_\_\_ How many feet? **10 ft. tops**

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|----|----------------|------|----|--------------------|
| 0    | 25 | Fine Sand      |      |    |                    |
| 25   | 50 | Coarse Sand    |      |    |                    |
| 50   | 71 | Fine Sand      |      |    |                    |
| 71   | 80 | Coarse Sand    |      |    |                    |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **X** (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **6-23-04** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **672** This Water Well Record was completed on (mo/day/yr) **6-14-04** under the business name of **Crow's Water Well** by (signature) **[Signature]**