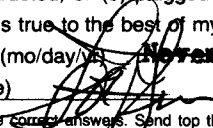


1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number					
County: Ford		SW 1/4 SW 1/4 SE 1/4		11		T 27 S		R 24 E/W					
Distance and direction from nearest town or city street address of well if located within city? 4 1/2 East on Wilroads Garden Road and 1/8 South													
2 WATER WELL OWNER:		Mr. Albert Rumsey											
RR#, St. Address, Box # :		Route 3, Box 182											
City, State, ZIP Code :		Dodge City, KS 67801											
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: 130 ft. ELEVATION: Slope											
<div style="text-align: center;">N 1 Mile W E S</div> <table border="1" style="margin: auto; text-align: center;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table>		NW	NE	SW	SE	Depth(s) Groundwater Encountered 1. Not available ft. 2. . ft. 3. . ft.							
		NW	NE										
		SW	SE										
		WELL'S STATIC WATER LEVEL 21 ft. below land surface measured on mo/day/yr October 25, 1990											
		Pump test data: Well water was . ft. after . hours pumping . gpm											
Est. Yield 30 gpm: Well water was . ft. after . hours pumping . gpm													
Bore Hole Diameter 10 in. to 130 ft., and . in. to . ft.		WELL WATER TO BE USED AS:											
<input checked="" type="checkbox"/> 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. <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted													
Water Well Disinfected? Yes <input checked="" type="checkbox"/> No													
5 TYPE OF BLANK CASING USED:													
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile		CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped . . .					
<input checked="" type="checkbox"/> PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)		Welded . . .					
				7 Fiberglass				Threaded. . .					
Blank casing diameter 5 in. to 110 ft., Dia . in. to . ft., Dia . in. to . ft.													
Casing height above land surface 18 in., weight 2.8 lbs./ft. Wall thickness or gauge No. .265													
TYPE OF SCREEN OR PERFORATION MATERIAL: <input checked="" type="checkbox"/> PVC													
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		<input checked="" type="checkbox"/> 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 110 ft. to 130 ft., From . ft. to . ft.													
GRAVEL PACK INTERVALS: From 40 ft. to 130 ft., From . ft. to . ft.													
From . ft. to . ft., From . ft. to . ft.													
6 GROUT MATERIAL:													
1 Neat cement		2 Cement grout		3 Bentonite		<input checked="" type="checkbox"/> Other Baroid Hole Plug							
Grout Intervals: From 3 ft. to 40 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		<input checked="" type="checkbox"/> 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? Northwest													
How many feet? 300													
FROM		TO		LITHOLOGIC LOG		FROM		TO					
								PLUGGING INTERVALS					
0		2		Topsoil									
2		6		Clay									
6		24		Med. Sand									
24		72		Clay									
72		129		Med. Sand									
129		130		Clay									
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) October 31, 1990 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 252 This Water Well Record was completed on (mo/day/yr) November 26, 1990 under the business name of Friesen Windmill & Supply Inc. by (signature) 													
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.													

OFFICE USE ONLY

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R

E/W

SEC.

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