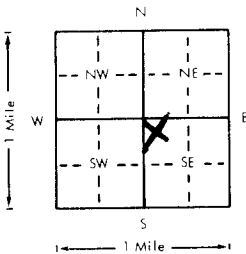


|                                                                                                                                                                                                                                                                                                                                                               |  |                                                                               |                          |                            |                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------|--------------------------|----------------------------|-------------------------|
| 1 LOCATION OF WATER WELL                                                                                                                                                                                                                                                                                                                                      |  | County: <u>Sedgwick</u>                                                       | Section Number: <u>8</u> | Township Number: <u>28</u> | Range Number: <u>40</u> |
| Distance and direction from nearest town or city?                                                                                                                                                                                                                                                                                                             |  | Street address of well if located within city? <u>202 Jefferson Cheney KS</u> |                          |                            |                         |
| 2 WATER WELL OWNER: <u>LEO Koenigs</u><br>RR#, St. Address, Box #: <u>R#1</u><br>City, State, ZIP Code: <u>Garden Plain KS.</u>                                                                                                                                                                                                                               |  |                                                                               |                          |                            |                         |
| Board of Agriculture, Division of Water Resources<br>Application Number:                                                                                                                                                                                                                                                                                      |  |                                                                               |                          |                            |                         |
| 3 DEPTH OF COMPLETED WELL: <u>96</u> ft. Bore Hole Diameter: <u>11</u> in. to . . . . . ft., and . . . . . in. to . . . . . ft.                                                                                                                                                                                                                               |  |                                                                               |                          |                            |                         |
| Well Water to be used as:<br>1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well<br>2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)<br>7 Lawn and garden only 10 Observation well                                                                                                        |  |                                                                               |                          |                            |                         |
| Well's static water level: <u>18</u> ft. below land surface measured on . . . . . month <u>12</u> day <u>20</u> year <u>79</u>                                                                                                                                                                                                                                |  |                                                                               |                          |                            |                         |
| Pump Test Data<br>Est. Yield <u>40</u> gpm: Well water was <u>29</u> ft. after <u>1/2</u> hours pumping. <u>15</u> gpm<br>Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm                                                                                                                                                            |  |                                                                               |                          |                            |                         |
| 4 TYPE OF BLANK CASING USED:<br>1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)<br>Blank casing dia: <u>5</u> in. to <u>29</u> in. Dia: <u>1.50</u> lbs./ft. Wall thickness or gauge No: <u>1200</u>                                                                                     |  |                                                                               |                          |                            |                         |
| TYPE OF SCREEN OR PERFORATION MATERIAL:<br>1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)                                                                                                                                            |  |                                                                               |                          |                            |                         |
| Screen or Perforation Openings Are:<br>1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 11 None (open hole)<br>Screen-Perforation Dia: <u>5</u> in. to <u>96</u> ft. Dia: . . . . . in. to . . . . . ft. Dia: . . . . . in. to . . . . . ft.                                              |  |                                                                               |                          |                            |                         |
| Screen-Perforated Intervals:<br>From: <u>29</u> ft. to <u>96</u> ft. From: . . . . . ft. to . . . . . ft. From: . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                |  |                                                                               |                          |                            |                         |
| Gravel Pack Intervals:<br>From: <u>13</u> ft. to <u>96</u> ft. From: . . . . . ft. to . . . . . ft. From: . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                      |  |                                                                               |                          |                            |                         |
| 5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other . . . . .<br>Grouted Intervals: From: <u>3</u> ft. to <u>13</u> ft. From: . . . . . ft. to . . . . . ft. From: . . . . . ft. to . . . . . ft.                                                                                                                                              |  |                                                                               |                          |                            |                         |
| What is the nearest source of possible contamination:<br>1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)          |  |                                                                               |                          |                            |                         |
| Direction from well: <u>NE AS 7</u> How many feet: <u>75</u> ? Water Well Disinfected? Yes <u>X</u> No . . . . .                                                                                                                                                                                                                                              |  |                                                                               |                          |                            |                         |
| Was a chemical/bacteriological sample submitted to Department? Yes . . . . . No . . . . . If yes, date sample was submitted . . . . . month . . . . . day . . . . . year: Pump Installed? Yes . . . . . No . . . . .                                                                                                                                          |  |                                                                               |                          |                            |                         |
| If Yes: Pump Manufacturer's name . . . . . Model No. . . . . HP . . . . . Volts . . . . .                                                                                                                                                                                                                                                                     |  |                                                                               |                          |                            |                         |
| Depth of Pump Intake . . . . . ft. Pumps Capacity rated at . . . . . gal./min.                                                                                                                                                                                                                                                                                |  |                                                                               |                          |                            |                         |
| Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other                                                                                                                                                                                                                                                                             |  |                                                                               |                          |                            |                         |
| 6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on . . . . . month <u>12</u> day <u>20</u> year <u>79</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 . . . . . month <u>7</u> day <u>29</u> year <u>80</u>                                                                                                                                                                                                                                                                 |  |                                                                               |                          |                            |                         |
| name of <u>Weninger Pumping Co</u> by (signature) <u>Jerome Weninger</u>                                                                                                                                                                                                                                                                                      |  |                                                                               |                          |                            |                         |
| 7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                          |  | LITHOLOGIC LOG                                                                |                          |                            |                         |
|                                                                                                                                                                                                                                                                             |  | FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG                                 |                          |                            |                         |
|                                                                                                                                                                                                                                                                                                                                                               |  | 0 28 TOP SOIL                                                                 |                          |                            |                         |
|                                                                                                                                                                                                                                                                                                                                                               |  | 2 18 Red clay                                                                 |                          |                            |                         |
|                                                                                                                                                                                                                                                                                                                                                               |  | 18 40 med. sand                                                               |                          |                            |                         |
|                                                                                                                                                                                                                                                                                                                                                               |  | 40 96 Red & blue green shale                                                  |                          |                            |                         |
| ELEVATION:                                                                                                                                                                                                                                                                                                                                                    |  |                                                                               |                          |                            |                         |
| Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft. 4. . . . . ft. (Use a second sheet if needed)                                                                                                                                                                                                                                   |  |                                                                               |                          |                            |                         |
| 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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records. |  |                                                                               |                          |                            |                         |

OFFICE USE ONLY

T 28

R 4

(NW)

SEC.

8

NW 1/4 NW 1/4 SE 1/4