	W	ATER WELL RECO	ORD Form WWC	-5 KSA 82	a-1212 ID N	0.		
1 LOCATION O	F WATER WELL:	Fraction			Section Number	Township Number	Range Number	
County: Kin	gman	SW 1/4	SW 14 SW	1/4	19	T 28 8	R 7W E/W	
Distance and direction from nearest town or city street address of well if located within city?								
4S, 1 1/4W of Kingman, KS								
2 WATER WELL OWNER: Ralph Henning Sterling Drilling Comapny Henning #2								
 BR# St Address	Box # : RR 3	•	P.	O. Box	1006	Board of Agricultu	ure, Division of Water Resources	
City, State, ZIP C	ode : K in qm	an, KS 6706	se Pr	att, KS	67124	Application Numb	per: 20050062	
3 LOCATE WELL'S LOCATION WITH 4 DEPTH OF COMPLETED WELL								
AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 160								
WELL'S STATIC WATER LEVEL60								
Pump test data: Well water was ft. after hours pumping gp								
- NW NE Est. Yield40 gpm: Well water was								
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)							11 Injection well 12 Other (Specify below)	
W E 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well								
SW SE Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs sample was submitted to Department?								
1	was a chemical/bacteriological sample submitted to Department: Tes							
X I I								
5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued								
5 TYPE OF BL/ 1 Steel	3 RMP (S		5 Wrought iron6 Asbestos-Cemen		crete the er (specify below		Welded	
2 PVC	4 ABS	,	7 Fiberglass		` '	/	Threaded	
Blank casing diar	neter	in. to	7.2 ft Dia		in. to	ft Dia	in. to ft.	
Blank casing diameter								
TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-Cement								
1 Steel	3 Stainles		5 Fiberglass		RMP (SR)		pecify)	
2 Brass	4 Galvani	zed Steel	6 Concrete tile	9	ABS	12 None use	ed (open hole)	
SCREEN OR PE	RFORATION OPENI	NGS ARE:	5 G	uazed wrappe	d	8 Saw cut	11 None (open hole)	
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes								
2 Louvered s	shutter 4 h	Key punched	7 To	orch cut		10 Other (specify)	ft.	
SCREEN-PERFORATED INTERVALS: From								
From								
GRAVEL PACK INTERVALS: Fromft. toft., Fromft. toft. ft. toft.								
F10111								
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other								
Grout Intervals: From								
	est source of possible						14 Abandoned water well	
1 Septic tan	k 4 Late	eral lines	7 Pit privy		11 Fuel storage		15. Oil well/Gas well.	
2 Sewer lines 5 Cess pool			8 Sewage lagoon				16 Other (specify below)	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage								
Direction from well? South How many feet? 105								
FROM T	0	LITHOLOGIC	LOG	FROM	то	PLUGGIN	NG INTERVALS	
0	top so	17						
3 1	_							
12 19		nd gravel					-	
19 5		-						
53 9:	_	nd gravel						
	shale b							
	3110116 1							
						EVA.		
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)								
Water Well Contractor's Licence No								
under the busines					bv	(signature) Kath	S Han I	
	Kelly		11 Service,		underline or circle the	e correct answers. Send ton three	copies to Kansas Department of Health	
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your								

records. Fee of \$5.00 for each constructed well.