Reeves #/

KSA 82a-1212 1 LOCATION OF WATER WELL: Section Number Township Number Range Number County: Harper T 3/ 8 Distance and direction from nearest town or city street address of well if located within city? Mi Wes WATER WELL OWNER: RR#, St. Address, Box Board of Agriculture, Division of Water Resources City, State, ZIP Code Application Number: LOCATE WELL'S LOCATION WITH 4 AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1...32......ft. 2........... ft. 3....... WELL'S STATIC WATER LEVEL ... 32.... ft. below land surface measured on mo/day/yr ... 77... 19 Pump test data: Well water was ... \$.c. . . . ft. after ... \$.4. . hours pumping ... . \$.c. . . gpm NF - -WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot A Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well Water Well Disinfected? Yes TYPE OF BLANK CASING USED: 5 Wrought iron CASING JOINTS: Glued . X. . . Clamped . . . . 8 Concrete tile 1 Steel 3 RMP (SR) 9 Other (specify below) 6 Asbestos-Cement Welded PVC 4 ABS 7 Fiberglass Threaded. . . . . ft., Dia . . ...in. to ..... ft., Dia .... in. to Casing height above land surface. ..... lbs./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: 10 Asbestos-cement 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) . . . . . . 9 ABS 2 Brass 4 Galvanized steel 6 Concrete tile 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 10 Other (specify) ...... 2 Louvered shutter 4 Key punched 7 Torch cut SCREEN-PERFORATED INTERVALS: GRAVEL PACK INTERVALS: 6 GROUT MATERIAL: Neat cement 2 Cement grout 3 Bentonite What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 1XOil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage Direction from well? How many feet? FROM LITHOLOGIC LOG FROM ITHOLOGIC LOC 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (Xplugged under my jurisdiction and was Water Well Contractor's License No. . . . . . . . . . . . . . . This Water Well Record was completed on (mo/day/yr), , , under the business name of 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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL

OWNER and retain one for your records