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| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            | Fraction                       | Section Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Township Number | Range Number         |                                                                                                           |  |  |
| County: <u>Sumner Co.</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            | <u>NW 1/4 SE 1/4 NW 1/4</u>    | <u>14</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | T <u>32</u> S   | R <u>1</u> <u>EW</u> |                                                                                                           |  |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>110 West 10th Street</u>                                                                                                                                                                                                                                                                                                                                                |            |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |
| 2 WATER WELL OWNER: <u>Sumner Co.</u>                                                                                                                                                                                                                                                                                                                                                                                                                                         |            |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |
| RR#, St. Address, Box #                                                                                                                                                                                                                                                                                                                                                                                                                                                       |            |                                | Board of Agriculture, Division of Water Resources                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                 |                      |                                                                                                           |  |  |
| City, State, ZIP Code                                                                                                                                                                                                                                                                                                                                                                                                                                                         |            |                                | Application Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |                      |                                                                                                           |  |  |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                                                          |            |                                | 4 DEPTH OF COMPLETED WELL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |                      |                                                                                                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |                                | Depth(s) Groundwater Encountered 1. <u>1208.19</u> ft. 2. <u>1207.56</u> ft. 3. <u>1225.29</u> ft.<br>WELL'S STATIC WATER LEVEL <u>17.28</u> ft. below land surface measured on mo/day/yr <u>8/25/98</u><br>Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm<br>Est. Yield _____ gpm Well water was _____ ft. after _____ hours pumping _____ gpm<br>Bore Hole Diameter <u>8</u> in. to <u>25</u> ft. and _____ in. to _____ ft.<br>WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well<br>1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)<br>2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well<br>Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____<br>Water Well Disinfected? Yes _____ No <u>X</u> |                 |                      |                                                                                                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |                                | 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |                      | CASING JOINTS: Glued _____ Clamped _____                                                                  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |                                | 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile<br>2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____<br>7 Fiberglass Threaded <u>X</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |                      |                                                                                                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |            |                                | Blank casing diameter <u>2</u> in. to <u>5</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                      | Casing height above land surface <u>Flush</u> in. weight _____ 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<br>2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____<br>12 None used (open hole)                                                                                                                                                                                                                                                                                                 |            |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |
| SCREEN OR PERFORATION OPENINGS ARE:                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |
| 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)<br>2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes<br>7 Torch cut 10 Other (specify) _____                                                                                                                                                                                                                                                                                       |            |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |
| SCREEN-PERFORATED INTERVALS: From <u>25</u> ft. to <u>45</u> ft. From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                  |            |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |
| GRAVEL PACK INTERVALS: From <u>25</u> ft. to <u>4</u> ft. From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                         |            |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____                                                                                                                                                                                                                                                                                                                                                                                                      |            |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |
| Grout Intervals: From <u>4</u> 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<br>2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well<br>3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____<br>13 Insecticide storage                                                                                                                                                                     |            |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |
| Direction from well? <u>West</u> How many feet? <u>75</u>                                                                                                                                                                                                                                                                                                                                                                                                                     |            |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | TO         | LITHOLOGIC LOG                 | FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | TO              | PLUGGING INTERVALS   |                                                                                                           |  |  |
| <u>6"</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <u>15'</u> | <u>Silty Clay</u>              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |
| <u>15</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <u>25'</u> | <u>Fine - Very Coarse Sand</u> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |
| 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) <u>6-29-98</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>654</u> This Water Well Record was completed on (mo/day/yr) <u>7-27-98</u> under the business name of <u>Shirley E. Eddy, LLC</u> by (signature) <u>[Signature]</u> |            |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                                                                                                           |  |  |