

1 LOCATION OF WATER WELL: County: <u>Sumner</u>		Fraction <u>SE 1/4 SE 1/4 NW 1/4</u>	Section Number <u>11</u>	Township Number <u>T 32 S</u>	Range Number <u>R 1 E</u>						
Distance and direction from nearest town or city street address of well if located within city? <p style="text-align: right; margin-right: 50px;"><u>1606 N.B. Wellington Ks</u></p>											
2 WATER WELL OWNER: <u>Paul Cantrel</u> RR#, St. Address, Box #: <u>1606 N.B.</u> City, State, ZIP Code: <u>Wellington Ks 67152</u>			Board of Agriculture, Division of Water Resources Application Number:								
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"><table border="1" style="margin-left: auto; margin-right: auto;"><tr><td>NW</td><td>NE</td></tr><tr><td>X</td><td></td></tr><tr><td>SW</td><td>SE</td></tr></table></div>		NW	NE	X		SW	SE	4 DEPTH OF COMPLETED WELL: <u>50</u> ft. ELEVATION: Depth(s) Groundwater Encountered 1. <u>25</u> ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL <u>2.3</u> ft. below land surface measured on mo/day/yr <u>9/18/90</u> Pump test data: Well water was ft. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm Bore Hole Diameter <u>8</u> in. to <u>26</u> ft., and <u>6</u> in. to <u>50</u> ft. 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) 2 Irrigation 4 Industrial <u>7 Lawn and garden only</u> 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? <u>Yes</u> No			
NW	NE										
X											
SW	SE										
5 TYPE OF BLANK CASING USED: 1 Steel <u>3 RMP (SR)</u> 2 PVC 4 ABS Blank casing diameter <u>5</u> in. to <u>20</u> ft. Dia in. to ft. Dia in. to ft. Dia in. to ft. Dia Casing height above land surface <u>12</u> in., weight lbs./ft. Wall thickness or gauge No. <u>SDR 26</u>		CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped Welded Threaded									
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass <u>8 RMP (SR)</u> 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS		7 PVC 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE: <u>1 Continuous slot</u> 3 Mill slot 2 Louvered shutter 4 Key punched		5 Gauzed wrapped 8 Saw cut 11 None (open hole) 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From <u>20</u> ft. to <u>50</u> ft. From ft. to ft. From ft. to ft.											
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>50</u> ft. From ft. to ft. From ft. to ft.											
6 GROUT MATERIAL: 1 Neat cement <u>2 Cement grout</u> 3 Bentonite 4 Other		Grout Intervals: From <u>20</u> ft. to <u>2</u> 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 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well <u>3 Watertight sewer lines</u> 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) Direction from well? <u>South</u> How many feet? <u>15</u>											
FROM TO LITHOLOGIC LOG		FROM TO PLUGGING INTERVALS									
0 1 Topsoil											
1 23 Red Clay											
23 25 Course Gravel		water									
25 50 Shale											
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>9/18/90</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>528</u> This Water Well Record was completed on (mo/day/yr) <u>9/19/90</u> under the business name of <u>CCC Water Well Drilling</u> by (signature) <u>[Signature]</u>											
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.											