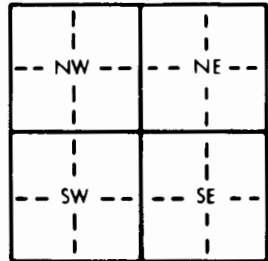


LOCATION OF WATER WELL: County: <u>Sumner</u>		WATER WELL RECORD <u>NC NW SE</u>		Section Number <u>23</u>	Township Number T <u>32</u> S	Range Number R <u>1</u> E/W <u>(W)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>732 S. Washington</u>						
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :		<u>Bill Hull</u> <u>732 S. Washington</u> <u>Wellington, KS 67152</u>		Board of Agriculture, Division of Water Resources Application Number: <u>14</u>		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>50</u> ft. ELEVATION: <u>-</u>				
		Depth(s) Groundwater Encountered <u>1</u> ft. 2. <u>?</u> ft. 3. <u>?</u> ft. WELL'S STATIC WATER LEVEL <u>30</u> ft. below land surface measured on mo/day/yr 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>7 7/8</u> in. to _____ ft., and _____ in. to _____ 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</u> Lawn and garden only 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes <u>X</u> No				
5 TYPE OF BLANK CASING USED: 1 Steel <u>2 PVC</u> Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. _____		CASING JOINTS: Glued <u>X</u> Clamped _____ Welded _____ Threaded _____				
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		3 Stainless steel 4 Galvanized steel 3 Mill slot 4 Key punched GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				
6 GROUT MATERIAL: Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) <u>Dont know</u> Direction from well? How many feet?				
FROM TO LITHOLOGIC LOG		FROM TO PLUGGING INTERVALS				
0 12 soil & clay						
12 20 fine to med. sand						
20 25 clay						
25 35 sand & clay mix						
35 50 fine sand						
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>5-2-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>506</u> This Water Well Record was completed on (mo/day/yr) <u>6-1-91</u> under the business name of <u>Metz Water Well Service</u> by signature <u>Dennis Metz</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.						