

|                           |                |                |                 |              |
|---------------------------|----------------|----------------|-----------------|--------------|
| 1 LOCATION OF WATER WELL: | Fraction       | Section Number | Township Number | Range Number |
| County: <u>Sumner</u>     | SE ¼ SW ¼ NE ¼ | <b>2</b>       | T 35 S          | R 3 EW       |

|   |                           |                     |   |
|---|---------------------------|---------------------|---|
| 2 | WATER WELL OWNER:         | Marvin Kloefkorn    |   |
|   | RR#, St. Address, Box # : | 21 North Main       | Board of Agriculture, Division of Water Resources |
|   | City, State, ZIP Code :   | Caldwell, Ks. 67022 | Application Number:                               |

4 DEPTH OF COMPLETED WELL. 35.4 ft. ELEVATION: \_\_\_\_\_

Depth(s) Groundwater Encountered 1. 30 ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL 30.5 ft. below land surface measured on mo/day/yr 10-26-92

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 7 5/8 in. to 35.4 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       | 7 Lawn and garden only   | 10 Monitoring well |                          |

Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No ☒; If yes, mo/day/yr sample was submitted \_\_\_\_\_

Water Well Disinfected? Yes \_\_\_\_\_ No ☒

TYPE OF SCREEN OR PERFORATION MATERIAL:

|         |                    |                 |            |                          |
|---------|--------------------|-----------------|------------|--------------------------|
| 1 Steel | 3 Stainless steel  | 5 Fiberglass    | 7 PVC      | 10 Asbestos-cement       |
| 2 Brass | 4 Galvanized steel | 6 Concrete tile | 8 RMP (SR) | 11 Other (specify) ..... |
|         |                    |                 | 9 ABS      | 12 None used (open hole) |

|                        |      |    |        |      |           |        |     |
|------------------------|------|----|--------|------|-----------|--------|-----|
| GRAVEL PACK INTERVALS: | From | 18 | ft. to | 33.4 | ft., From | ft. to | ft. |
|                        | From |    | ft. to |      | ft., From | ft. to | ft. |

Direction from well? West How many feet? 50

| FROM | TO   | LITHOLOGIC LOG                   | FROM | TO | PLUGGING INTERVALS |
|------|------|----------------------------------|------|----|--------------------|
| 0    | 6"   | Concrete                         |      |    |                    |
| 6"   | 3'   | Sandy clay, dark brown           |      |    | Site ID # 00094949 |
| 3    | 9    | Clay, reddish brown              |      |    | Flush mount cover  |
| 9    | 14   | Sandy clay, grey                 |      |    |                    |
| 14   | 20   | Sand, red, fine to medium        |      |    |                    |
| 20   | 21.5 | Sand, light grey, fine to medium |      |    |                    |
| 21.5 | 24.5 | Sand, grey, fine to medium       |      |    |                    |
| 24.5 | 27   | Silty clay, red                  |      |    |                    |
| 27   | 30   | Sandy clay, red                  |      |    |                    |
| 30   | 32   | Sand, red, fine to very coarse   |      |    |                    |
| 32   | 35.4 | Shale, red, weathered            |      |    |                    |
|      |      |                                  |      |    |                    |
|      |      |                                  |      |    |                    |
|      |      |                                  |      |    |                    |

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) 09-04-92 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/yr) 10-12-92 under the business name of GeoCore Services, Inc. by (signature) [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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.