

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----------------------------------------------------------------------------------------------------|--|-------------------------|-----|---------------------------------------------------------|--|---------------------|--|
| <b>1 LOCATION OF WATER WELL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    | <b>Fraction</b>                                                                                    |  | <b>Section Number</b>   |     | <b>Township Number</b>                                  |  | <b>Range Number</b> |  |
| County: Phillips                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    | SW 1/4 SW 1/4 SW 1/4                                                                               |  | 26                      |     | T 4 S                                                   |  | R 18 E/W            |  |
| Distance and direction from nearest town or city street address of well if located within city?<br>Approximately 1 mile south and 1 mile west of Glade                                                                                                                                                                                                                                                                                                                                 |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |
| <b>2 WATER WELL OWNER:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    | Phillipsburg, City of                                                                              |  |                         |     |                                                         |  |                     |  |
| RR#, St. Address, Box # :                                                                                                                                                                                                                                                                                                                                                                                                                                                              |    | City Hall<br>945 2nd Street                                                                        |  |                         |     |                                                         |  |                     |  |
| City, State, ZIP Code :                                                                                                                                                                                                                                                                                                                                                                                                                                                                |    | Phillipsburg, KS 67661                                                                             |  |                         |     |                                                         |  |                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    | Board of Agriculture, Division of Water Resources<br>Application Number: 3059                      |  |                         |     |                                                         |  |                     |  |
| <b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>                                                                                                                                                                                                                                                                                                                                                                                                                            |    | <b>4 DEPTH OF COMPLETED WELL</b> 45 ft. <b>ELEVATION:</b>                                          |  |                         |     |                                                         |  |                     |  |
| <div style="text-align: center;">N<br/>1 Mile<br/>W<br/>E<br/>S<br/>X</div>                                                                                                                                                                                                                                                                                                                                                                                                            |    | Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.                      |  |                         |     |                                                         |  |                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    | WELL'S STATIC WATER LEVEL 9.2 ft. below land surface measured on mo/day/yr 5-9-94                  |  |                         |     |                                                         |  |                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    | 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 . . . . . in. to . . . . . ft., and . . . . . in. to . . . . . ft.              |  |                         |     |                                                         |  |                     |  |
| <b>WELL WATER TO BE USED AS:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    | 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 . . . . .                                                 |  |                         |     |                                                         |  |                     |  |
| <b>5 TYPE OF BLANK CASING USED:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                    |    | 5 Wrought iron                                                                                     |  | 8 Concrete tile         |     | <b>CASING JOINTS:</b> Glued . . . . . Clamped . . . . . |  |                     |  |
| 1 Steel 3 RMP (SR)                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    | 6 Asbestos-Cement                                                                                  |  | 9 Other (specify below) |     | Welded . . . . .                                        |  |                     |  |
| 2 PVC 4 ABS                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    | 7 Fiberglass                                                                                       |  |                         |     | Threaded . . . . .                                      |  |                     |  |
| Blank casing diameter 12" in. to . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.                                                                                                                                                                                                                                                                                                                                                                 |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |
| Casing height above land surface 5' below . . . . . in., weight . . . . . lbs./ft. Wall thickness or gauge No. . . . .                                                                                                                                                                                                                                                                                                                                                                 |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |
| <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                         |    | 7 PVC                                                                                              |  | 10 Asbestos-cement      |     |                                                         |  |                     |  |
| 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) NA                                                                                                                                                                                                                                                                                                                                                                                                                |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |
| 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)                                                                                                                                                                                                                                                                                                                                                                                                              |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |
| <b>SCREEN OR PERFORATION OPENINGS ARE:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                             |    | 5 Gauzed wrapped                                                                                   |  | 8 Saw cut               |     | 11 None (open hole)                                     |  |                     |  |
| 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes NA                                                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |
| 2 Louvered shutter 4 Key punched NA                                                                                                                                                                                                                                                                                                                                                                                                                                                    |    | 7 Torch cut NA                                                                                     |  | 10 Other (specify) NA   |     |                                                         |  |                     |  |
| <b>SCREEN-PERFORATED INTERVALS:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                    |    | From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.                           |  |                         |     |                                                         |  |                     |  |
| From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                                                                                                                                                                                                               |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |
| <b>GRAVEL PACK INTERVALS:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                          |    | From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.                           |  |                         |     |                                                         |  |                     |  |
| From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                                                                                                                                                                                                               |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |
| <b>6 GROUT MATERIAL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                               |    | 1 Neat cement                                                                                      |  | 2 Cement grout          |     | 3 Bentonite                                             |  | 4 Other . . . . .   |  |
| Grout Intervals: From . . . . . 8.2 . . . . . ft. to . . . . . 5 . . . . . ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.                                                                                                                                                                                                                                                                                                                               |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |
| 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 15 Oil 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 cattle pasture                                                                                                                                                                                                                                                                                                                                                                                                |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |
| Direction from well? well is within cattle pasture                                                                                                                                                                                                                                                                                                                                                                                                                                     |    | How many feet?                                                                                     |  |                         |     |                                                         |  |                     |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | TO | LITHOLOGIC LOG                                                                                     |  | FROM                    | TO  | PLUGGING INTERVALS                                      |  |                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                    |  | 45                      | 9.2 | Chlorinated sand                                        |  |                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                    |  | 9.2                     | 8.2 | Bentonite Holeplug                                      |  |                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                    |  | 8.2                     | 5   | Concrete Grout                                          |  |                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                    |  | 5                       | 0   | Topsoil & clay                                          |  |                     |  |
| <b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 5-9-94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/yr) 6-14-94 under the business name of Clarke Well & Equipment, Inc. by (signature) <i>Clarke Well &amp; Equipment, Inc.</i> |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |
| 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.                                                                                                                        |    |                                                                                                    |  |                         |     |                                                         |  |                     |  |