

|                           |                             |                |                 |                 |
|---------------------------|-----------------------------|----------------|-----------------|-----------------|
| 1 LOCATION OF WATER WELL: | Fraction                    | Section Number | Township Number | Range Number    |
| County: <u>Dedatur</u>    | <u>NW 1/4 NW 1/4 NW 1/4</u> | <u>13</u>      | <u>T 5 S</u>    | <u>R 28 E/W</u> |

Distance and direction from nearest town or city street address of well if located within city?

in Dresden

|                                                     |                                                   |
|-----------------------------------------------------|---------------------------------------------------|
| 2 WATER WELL OWNER: <u>City of Dresden</u>          | Board of Agriculture, Division of Water Resources |
| RR#, St. Address, Box #: <u>306 Kansas Ave.</u>     | Application Number:                               |
| City, State, ZIP Code: <u>Dresden, Kansas 67635</u> |                                                   |

|                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | 4 DEPTH OF COMPLETED WELL <u>185</u> ft. ELEVATION:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                      | Depth(s) Groundwater Encountered 1 ..... ft. 2 ..... ft. 3 ..... ft.<br>WELL'S STATIC WATER LEVEL <u>110</u> ft. below land surface measured on mo/day/yr <u>4-18-07</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>WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well<br>1 Domestic <u>X</u> 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)<br>2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 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 <u>X</u> No |

|                                                                                                 |                    |                   |                                             |
|-------------------------------------------------------------------------------------------------|--------------------|-------------------|---------------------------------------------|
| 5 TYPE OF BLANK CASING USED:                                                                    | 5 Wrought iron     | 8 Concrete tile   | CASING JOINTS: Glued <u>X</u> Clamped ..... |
| 1 Steel                                                                                         | 3 RMP (SR)         | 6 Asbestos-Cement | 9 Other (specify below)                     |
| 2 PVC <u>X</u>                                                                                  | 4 ABS              | 7 Fiberglass      | Welded .....                                |
| Blank casing diameter <u>5</u> in. to <u>185</u> ft., Dia                                       |                    |                   | Threaded .....                              |
| Casing height above land surface ..... in., weight .....                                        |                    |                   | lbs./ft. Wall thickness or gauge No. ....   |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                         |                    |                   |                                             |
| 1 Steel                                                                                         | 3 Stainless Steel  | 5 Fiberglass      | 7 PVC <u>X</u>                              |
| 2 Brass                                                                                         | 4 Galvanized Steel | 6 Concrete tile   | 8 RMP (SR)                                  |
|                                                                                                 |                    |                   | 9 ABS                                       |
|                                                                                                 |                    |                   | 10 Asbestos-Cement                          |
|                                                                                                 |                    |                   | 11 Other (Specify) .....                    |
|                                                                                                 |                    |                   | 12 None used (open hole)                    |
| SCREEN OR PERFORATION OPENINGS ARE:                                                             |                    |                   |                                             |
| 1 Continuous slot                                                                               | 3 Mill slot        | 5 Guazed wrapped  | 8 Saw cut <u>X</u>                          |
| 2 Louvered shutter                                                                              | 4 Key punched      | 6 Wire wrapped    | 9 Drilled holes                             |
|                                                                                                 |                    | 7 Torch cut       | 10 Other (specify) .....                    |
|                                                                                                 |                    |                   | 11 None (open hole)                         |
| SCREEN-PERFORATED INTERVALS: From <u>185</u> ft. to <u>165</u> ft., From ..... ft. to ..... ft. |                    |                   |                                             |
| GRAVEL PACK INTERVALS: From <u>185</u> ft. to <u>20</u> ft., From ..... ft. to ..... ft.        |                    |                   |                                             |

|                                                                                  |                        |                 |                           |                          |
|----------------------------------------------------------------------------------|------------------------|-----------------|---------------------------|--------------------------|
| 6 GROUT MATERIAL:                                                                | 1 Neat cement <u>X</u> | 2 Cement grout  | 3 Bentonite               | 4 Other .....            |
| Grout Intervals: From <u>3</u> ft. to <u>20</u> ft., From ..... ft. to ..... ft. |                        |                 |                           |                          |
| What is the nearest source of possible contamination:                            |                        |                 |                           |                          |
| 1 Septic tank <u>X</u>                                                           | 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     |
| 3 Watertight sewer lines                                                         | 6 Seepage pit          | 9 Feedyard      | 12 Fertilizer storage     | 16 Other (specify below) |
| Direction from well? <u>north</u>                                                |                        |                 |                           |                          |
|                                                                                  |                        |                 | How many feet? <u>300</u> |                          |

| FROM | TO  | LITHOLOGIC LOG                    | FROM | TO | PLUGGING INTERVALS |
|------|-----|-----------------------------------|------|----|--------------------|
| 0    | 12  | top soil                          |      |    |                    |
| 12   | 40  | clay dark brown                   |      |    |                    |
| 40   | 55  | clay lighter brown                |      |    |                    |
| 55   | 75  | ant hillsize sand & clay strips   |      |    |                    |
| 75   | 80  | Lg rock gravel & clay             |      |    |                    |
| 80   | 87  | light brown clay                  |      |    |                    |
| 87   | 95  | rock                              |      |    |                    |
| 95   | 110 | light tan clay & rock             |      |    |                    |
| 110  | 135 | sand small grain                  |      |    |                    |
| 135  | 145 | greenish brown clay & sand strips |      |    |                    |
| 145  | 183 | sand & clay strips                |      |    |                    |
| 183  | 185 | oaker                             |      |    |                    |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
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| 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>4-18-07</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No <u>649</u> This Water Well Record was completed on (mo/day/yr) <u>5-2-07</u> under the business name of <u>Bartell Drilling</u> by (signature) <u>Daytime Bartell</u> |
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INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.