

|   |  |  |                |   |               |
|---|--|--|----------------|---|---------------|
| 1) LOCATION OF WATER WELL:  |  | Fraction   | Section Number | Township Number                                 | Range Number  |
| County: <u>Thomas</u>   |  | <u>NE 1/4 SW 1/4 SE 1/4</u>  | <u>2</u>       | <u>T 7 S</u>                                    | <u>R 31 E</u> |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>Kansas + Pine Streets</u>   |  |  |                |   |               |
| 2) WATER WELL OWNER: <u>Don Dible</u>   |  |  |                |   |               |
| RR#, St. Address, Box #: <u>Box 45</u>  |  |  |                |   |               |
| City, State, ZIP Code: <u>Rexford, KS 67753</u>   |  |  |                |   |               |
| Board of Agriculture, Division of Water Resources   |  |  |                |   |               |
| Application Number:   |  |  |                |   |               |
| 3) LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:   |  | 4) DEPTH OF COMPLETED WELL: <u>100</u> ft. ELEVATION:  |                |   |               |
|   |  | Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.  |                |   |               |
|   |  | WELL'S STATIC WATER LEVEL <u>Dry</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 _____ 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 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 _____   |                |   |               |
| 5) TYPE OF BLANK CASING USED:   |  |  |                |   |               |
| ① Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____  |  |  |                |   |               |
| 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____  |  |  |                |   |               |
| 7 Fiberglass Threaded _____   |  |  |                |   |               |
| Blank casing diameter <u>5</u> in. to <u>100</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.  |  |  |                |   |               |
| Casing height above land surface <u>10</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____   |  |  |                |   |               |
| TYPE OF SCREEN OR PERFORATION MATERIAL:   |  |  |                |   |               |
| 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement  |  |  |                |   |               |
| 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____   |  |  |                |   |               |
| 12 None used (open hole)  |  |  |                |   |               |
| SCREEN OR PERFORATION OPENINGS ARE:   |  |  |                |   |               |
| 1 Continuous slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  |  |  |                |   |               |
| 2 Louvered shutter 6 Wire wrapped 9 Drilled holes   |  |  |                |   |               |
| 4 Key punched 7 Torch cut 10 Other (specify) _____  |  |  |                |   |               |
| SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.   |  |  |                |   |               |
| From _____ ft. to _____ ft., From _____ ft. to _____ ft.  |  |  |                |   |               |
| GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.   |  |  |                |   |               |
| From _____ ft. to _____ ft., From _____ ft. to _____ ft.  |  |  |                |   |               |
| 6) GROUT MATERIAL: 1 Neat cement 2 Cement grout ③ Bentonite 4 Other _____   |  |  |                |   |               |
| Grout Intervals: From <u>6</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  |  |  |                |   |               |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) <u>None</u>  |  |  |                |   |               |
| 13 Insecticide storage  |  |  |                |   |               |
| Direction from well? _____ How many feet? _____   |  |  |                |   |               |
| FROM  |  | TO   |                | LITHOLOGIC LOG                                  |               |
|   |  |  |                | JUN 12 1989                                     |               |
|   |  |  |                | DIVISION OF ENVIRONMENT                         |               |
|   |  |  |                | N. W. KS. GROUNDWATER MANAGEMENT DISTRICT No. 4 |               |
|   |  |  |                | 1175 S. Range • P.O. Box 906                    |               |
|   |  |  |                | Colby, Kansas 67701                             |               |
|   |  |  |                | FROM TO PLUGGING INTERVALS                      |               |
|   |  |  |                | Removed pad + 20' casing                        |               |
|   |  |  |                | Clay-sand mix                                   |               |
|   |  |  |                | Bentonite                                       |               |
|   |  |  |                | Top soil  |               |
| 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>6-6-89</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/yr) <u>6-7-89</u> under the business name of _____ by (signature) <u>Jim Simpson</u> |  |  |                |   |               |