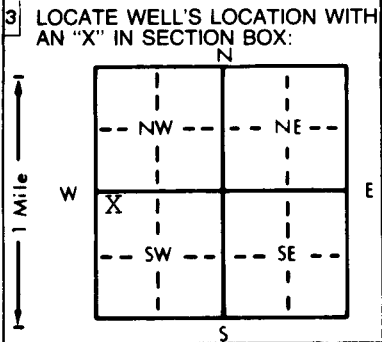


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: SHAWNEE	Fraction NW 1/4 NW 1/4 SW 1/4	Section Number 27	Township Number T 10S S	Range Number R 13E E/W
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Distance and direction from nearest town or city street address of well if located within city?
1/4 mile north of Rossville
SOUTH WELL #1

2 WATER WELL OWNER: CITY OF ROSSVILLE RR#, St. Address, Box # : P.O. Box 337 City, State, ZIP Code : Rossville, KS 66533	Drilled: 9/11/97 Board of Agriculture, Division of Water Resources Application Number:
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4 DEPTH OF COMPLETED WELL **53'** ft. ELEVATION: _____ ft.

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL **24'-4"** ft. below land surface measured on mo/day/yr **9/17/97**

Pump test data: Well water was **28'-7"** ft. after **12** hours pumping **350** gpm
 Est. Yield **350** gpm: Well water was **28'-9"** ft. after **24** hours pumping **350** gpm

Bore Hole Diameter **30"** 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
2 Irrigation	4 Industrial	7 Lawn and garden only
	10 Monitoring well	12 Other (Specify below)

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 <input checked="" type="checkbox"/>
		7 Fiberglass		Threaded _____

Blank casing diameter **12"** in. to **0-34'-6"** ft. Dia **12"** in. to **51'-6"-52'-6"** Dia _____ in. to _____ ft.

Casing height above land surface _____ in., weight **49.56** lbs./ft. Wall thickness or gauge No. **375**

TYPE OF SCREEN OR PERFORATION MATERIAL: **JOHNSON .150 slot**

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	3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From **34'-6"** ft. to **51'-6"** ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **25** ft. to **52'-6"** ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Intervals: From **0** ft. to **20** ft., From **20** ft. to **25** 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)
			13 Insecticide storage	

Direction from well? **SOUTH**

How many feet? **1/4 mile**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	Top Soil			
4	9	Clay-Grey			
9	22	Clay-Brown			
22	25	Fine Silt-Brown			
25	27	Clay-Brown-Silty			
27	30	Fine Sand-Coarse Sand-Brown			
30	34	Fine Sand-Coarse Sand-Med Gravel-Some Pea Gravel			
34	45	Fine Sand-Coarse Sand-Med Gravel-Pea Gravel-Brown			
45	52	Fine Sand-Coarse Sand-Med Gravel-Pea Gravel 1/4x3/8-Brown			
52	53	Shale-Tan			
53		Limestone-Grey			

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) **9/17/97** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **182** This Water Well Record was completed on (mo/day/yr) **9-29-97** under the business name of **STRADER DRILLING CO., INC.** by (signature) *Dale Strader*

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.