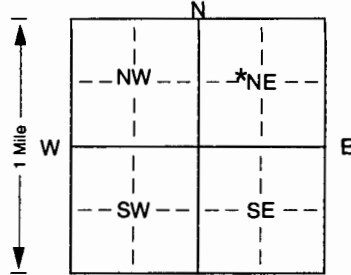


WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL: Fraction SE 1/4 NW 1/4 NE 1/4 Section Number 36 Township Number T 11 S Range Number R 1 E/W\*  
 County: Dickinson

Distance and direction from nearest town or city street address of well if located within city?  
2 1/2 mile North of Talmage, Ks to 3200 Ave & 1/4 mile on 3200 & South 1/8 mile

2 WATER WELL OWNER: Steve Copeland  
 RR#, St. Address, Box # : 660 3200 Ave Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Abilene, Kansas 67410 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL: 64 ft. ELEVATION: ..... ft.  
 Depth(s) Groundwater Encountered 1. .... 48 ..... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL 32 ..... ft. below land surface measured on mo/day/yr 12 / 9 / 01  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield .. 1.0 ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Bore Hole Diameter. .... 9 ..... in. to ..... 64 ..... 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 Domestic (lawn & garden) 10 Monitoring well .....  
 Was a chemical/bacteriological sample submitted to Department? Yes. .... No. \* ; If yes, mo/day/yrs sample was sub-  
 mitted Water Well Disinfected? Yes \* No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: 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 ..... 5 ..... in. to ..... 64 ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface. .... 15 ..... in., weight ..... 160 ..... lbs./ft. Wall thickness or gauge No. ... 2.14 .....  
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) .....  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes  
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) ..... ft.  
 SCREEN-PERFORATED INTERVALS: From. .... 44 ..... ft. to ..... 64 ..... ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From. .... 30 ..... ft. to ..... 64 ..... 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. .... 4 ..... ft. to ..... 30 ..... 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)  
 13 Insecticide storage .....  
 Direction from well? SOUTH WILL BE APPROX How many feet? 150

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	DARK TOP SOIL			
2	4	BROWN CLAY			
4	15	LITE COLOR SHALE & CLAY			
15	19	GRAY LITE COLOR SHALE			
19	29	LITE COLOR CLAY & SHALE			
29	33	LITE GRAY CLAY & SHALE			
33	48	LITE COLOR CLAY & SHALE			
48	51	HARD GRAY SHALE			
51	60	GRAY CLAY SHALE			
60	61	GYPSUM ROCK			
61	64	DARK SHALE			

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) 12 / 9 / 01 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. .... 397 ..... This Water Well Record was completed on (mo/day/yr) 12 / 23 / 01 ..... under the business name of CENTRAL KANSAS DRILLING by (signature) Harold D. Martin

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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.