

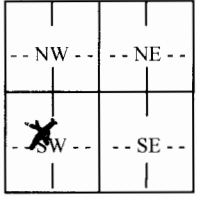
WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>CLAY</u>	Fraction <u>SE 1/4 NW 1/4 SW 1/4</u>	Section Number <u>30</u>	Township Number <u>T 11 S</u>	Range Number <u>R 5 E</u>	
Distance and direction from nearest town or city street address of well if located within city?		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: <u>39.06413</u> Longitude: <u>96.92375</u> Elevation: _____ Datum: _____ Data Collection Method: _____			

2 WATER WELL OWNER: MR GREG MORGAN
RR#, St. Address, Box # : 3830 BROOKFIELD DR.
City, State, ZIP Code : JUNCTION CITY, KS. 66441

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  W E S	4 DEPTH OF COMPLETED WELL <u>180</u> ft. Depth(s) Groundwater Encountered (1)..... <u>37</u> ft. (2)..... _____ ft. (3)..... _____ ft. WELL'S STATIC WATER LEVEL..... <u>35</u> ft. below land surface measured on mo/day/yr. <u>9/28/08</u> Pump test data: Well water was _____ ft. after _____ hours pumping..... gpm Est. Yield. <u>10</u> gpm: Well water was _____ ft. after _____ hours pumping..... gpm 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 6 <u>Domestic (lawn & garden)</u> 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u>; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <u>X</u> No _____
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5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued. X Clamped.....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded.....
PVC 4 ABS 7 Fiberglass _____ Threaded.....
Blank casing diameter 6 in. to 180 ft., Diameter. _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height above land surface..... 24 in., Weight _____ lbs./ft. Wall thickness or guage No. SOR26
TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel 3 Stainless Steel 5 Fiberglass PVC 9 ABS 11 Other (Specify)
2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
1 Continuous slot Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify)
SCREEN-PERFORATED INTERVALS: From 30 ft. to 50 ft., From _____ ft. to _____ ft.
From 90 ft. to 100 ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 25 ft. to 120 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 0 ft. to 25 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 13 Insecticide storage 16 Other (Specify below) HOUSE
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/gas well
Direction from well? SOUTHWEST How many feet? 170

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	SOIL	118	135	SHALE, GRAY
1	3	LIMESTONE	135	147	LIMESTONE
3	25	SHALE, BROWN	147	160	SHALE, GRAY
25	38	LIMESTONE	160	180	LIMESTONE
38	55	SHALE, GRAY			
55	75	LIMESTONE			
75	82	SHALE, GRAY			
82	87	LIMESTONE			
87	112	SHALE, GRAY			
112	118	LIMESTONE			

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) 9/28/08 and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. 760..... This Water Well Record was completed on (mo/day/year) 12/10/08 under the business name of ASSOCIATED DRILLERS INC by (signature) [Signature]

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, 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. Visit us at <http://www.kdheks.gov/waterwell/index.html>.