WATER WELL RECORD N03   Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL:

County _Harvey_   Fraction NW¼ SW¼ NW¼   Section Number **5**   Township Number T **23** S   Range Number R **1** E/W

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

In City N. Newton 3001 Fry Dr.

Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: _____
Longitude: _____
Elevation: _____
Datum: _____
Data Collection Method: _____

2 WATER WELL OWNER: _Kidron Bethel Villiage_

RR#, St. Address, Box # : _3001 Fry Dr._
City, State, ZIP Code : _N. Newton, KS. 67114_

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

```
        N
  | X NW | -- NE -- |
W |------|----------| E
  | -- SW | -- SE -- |
        S
```

4 DEPTH OF COMPLETED WELL _93_ ft.

Depth(s) Groundwater Encountered (1) _25_ ft. (2) _____ ft. (3) _____ ft.
WELL'S STATIC WATER LEVEL _3.3_ ft. below land surface measured on mo/day/yr _10-6-06_
Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
Est. Yield _30_ 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   7 Domestic ((lawn) & garden)   10 Monitoring well   ....

Was a chemical/bacteriological sample submitted to Department? Yes .... (No) ....; If yes, mo/day/yrs
Sample was submitted .... Water well disinfected? (Yes) .... No ....

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 ....
2 PVC   4 ABS   7 Fiberglass   ....   Threaded ....

Blank casing diameter _5_ in. to _25_ ft., Diameter _5_ in. to _63_ ft., Diameter _____ in. to _____ ft.
Casing height above land surface _12_ in., Weight _____ lbs./ft. Wall thickness or guage No. _214_

TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel   3 Stainless Steel   5 Fiberglass   _7 PVC_   9 ABS   11 Other (Specify) ....
2 Brass   4 Galvanized Steal   6 Concrete tile   8 RM (SR)   10 Asbestos-Cement   12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
1 Continuous slot   3 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 _25_ ft. to _35_ ft., From _63_ ft. to _93_ ft.
From _20_ ft. to _93_ 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 _0_ ft. to _20_ 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
2 Sewer lines   5 Cess pool   8 Sewage lagoon   11 Fuel storage   14 Abandoned water well   below)
3 Watertight sewer lines   6 Seepage pit   9 Feedyard   12 Fertilizer Storage   15 Oil well/gas well   ....
Direction from well? _N_   How many feet? _Approx 100_

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	25	Clay yellow & Brown			
25	33	Sand			
33	75	Blue Shale			
75	76	Water			
76	93	Blue 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) _10-6-06_ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _180_ This Water Well Record was completed on (mo/day/year) _10-15-06_ under the business name of _Backhus Drilling_ by (signature) _Paul M Backhus_

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.

KSA 82a-1212