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

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Butler	SE ¼ NW ¼ SE ¼	30	T 25 S	R 6 E

Distance and direction from nearest town or city? ½N 1¼E | Street address of well if located within city? El Dorado

2 WATER WELL OWNER: US Govt Army Corps of Engineers W-17
RR#, St. Address, Box # : 222 Board of Agriculture, Division of Water Resources
City, State, ZIP Code : El Dorado Ks. 67042 Application Number:

3 DEPTH OF COMPLETED WELL 107 ft. Bore Hole Diameter 10" in. to 107 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 Observation well Plug

Well's static water level 25' ft. below land surface measured on 1 month 11 day 1980 year

Pump Test Data: Well water was ..... ft. after ..... hours pumping ..... gpm
Est. Yield 4-5 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 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 Tin Threaded .....

Blank casing dia 9" + in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

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

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) .....

Screen-Perforation Dia ..... in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in to ..... ft.

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.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....

Grouted Intervals: From 47 ft. to 27 ft., From 15 ft. to 3" ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination: 10 Fuel storage 14 Abandoned water well
1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 15 Oil well/Gas well
2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below)
3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines .....

Direction from well ..... How many feet ..... ? Water Well Disinfected? Yes ..... No .....

Was a chemical/bacteriological sample submitted to Department? Yes ..... No ..... If yes, date sample was submitted ..... month ..... day ..... year: Pump Installed? Yes ..... No .....

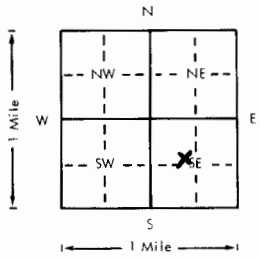
If Yes: Pump Manufacturer's name ..... Model No. ..... HP ..... Volts .....

Depth of Pump Intake ..... ft. Pumps Capacity rated at ..... gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 1 month 11 day 1980 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 203. This Water Well Record was completed on 1 month 14 day 1980 year under the business name of McNee Drilling by (signature) [signature]

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



FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	107	Clean Hole + Remove Casing			
107	47	Lime Screenings			
47	27	Neat Cement			
27	15	Screenings			
15	3	Neat Cement			

ELEVATION:

Depth(s) Groundwater Encountered 1 55 ft. 2 ..... ft. 3 ..... ft. 4 ..... ft. (Use a second sheet if needed)

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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.