|  |  |                             |                   | TER WELL REC                   | ORD Form   | WWC-5                    | KSA 828  | a-1212                                     |                                      |                            |                |
|--|--|-----------------------------|-------------------|--------------------------------|--|--------------------------|--|--|--------------------------------------|----------------------------|----------------|
| 1 LOCATION   |  |                             | Fraction          | 4-                             | (4.1   |                          | tion Number  |  |                                      | 1                          | Number         |
| County: 52   |  | from nearest tov            | yn or city street |                                |  | nin city?                | 4  | TZ   | I s                                  | <u> R</u>                  | E/W            |
| Diotarioo ario   | lle  | 1 7                         | JAC &             | Brood                          |  |                          |  |  |                                      | WND-                       | 345            |
| 2 WATER  | WELL OW  |                             | שום כו            | Harch                          |  | D ,                      |  | -  |                                      |                            |                |
| RR#, St. Ad  | dress, Bo  | 1 7                         | 23, 12,           | Rock                           | Lood   |                          |  | Board of                                   | Agriculture                          | , Division of Wa           | iter Resources |
| City, State, 2   |  |                             | o coma            | 155                            |  | -                        |  |  | on Number                            |                            |                |
| 3 LOCATE   | WELL'S LO  | CATION WITH                 |                   |                                |  |                          |  | ATION:                                     |                                      |                            |                |
|  | SECTION  | BOX.                        |                   |                                |  |                          |  | 2  |                                      |                            | _97.ft.        |
| l T  | -  | ! !                         | I                 |                                |  |                          |  | rface measured                             |                                      |                            | 11.11.6.       |
|  | NW   | NE                          |                   |                                |  |                          |  | after                                      |                                      |                            |                |
|  | !  | !                           |                   | ~                              |  |                          |  | after                                      | •                                    |                            | •              |
| * w   —  |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
| -  | The state of the s |                             |                   |                                |  |                          |  |  |                                      |                            |                |
|  | 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 Monitoring well   |                             |                   |                                |  |                          |  |  |                                      |                            |                |
|  | Was a chemical/bacteriological sample submitted to Department? YesNo; If yes, mo/day/yr sample wa  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
| I  | \$   |                             | mitted            |                                | ·  |                          |  | ater Well Disinfe                          | -                                    | No                         | _/             |
| 5 TYPE OF  | BLANK C  | ASING USED:                 |                   | 5 Wrought                      | iron   | 8 Concre                 | ete tile   | CASING .                                   | OINTS: Glu                           | ed Clar                    | nped           |
| Stee   | l  | 3 RMP (S                    | R)                | 6 Asbestos                     | -Cement  | 9 Other                  | (specify belo  | w)   | We                                   | lded                       |                |
| (2)PVC   |  | A ABS                       | 1                 | 7 Fiberglass                   |  |                          |  |  |                                      | eaded                      |                |
|  | •  | d                           |                   | ft., Dia                       | ٠  | <b>q</b> .in. to         |  | ft., Dia                                   |                                      |                            |                |
|  |  | and surface                 |                   | in., weight .                  |  | • • •                    |  | ft. Wall thicknes                          |                                      |                            | <del></del>    |
|  |  | R PERFORATIO                |                   | 5 Fibouries                    | _  | (7)PV                    | C<br>IP (SR)   |  | sbestos-cer                          |                            | •              |
| 1 Steel 3 Stainless steel 2 Brass 4 Galvanized steel             |  |                             |                   | 6 Concrete                     |  |                          |  |  | Other (specify)                      |                            |                |
| 2 Bras   | _  | A Galvania<br>RATION OPENIN |                   | o Concrete                     |  |                          |  | None used (open hole)  11 None (open hole) |                                      | nen hole)                  |                |
|  | inuous slo   | ~                           | fill slot         |                                | 5 Gauzed wrapped<br>6 Wire wrapped                 |                          |  | 9 Drilled hole                             | s                                    | 11 None (of                | Jen noie)      |
|  | ered shutt   | _                           | ey punched        |                                | 7 Torch cut  |                          |  |  |                                      | <i>.</i>                   |                |
|  |  | D INTERVALS:                |                   |                                |  | 7                        | ft., Fro   | m  | • •                                  |                            |                |
|  |  |                             | From              | , n                            | . ft. to   |                          | ft., Fro   | m  | ft.                                  | to                         |                |
| GF   | RAVEL PA   | CK INTERVALS:               | From              | <i>I</i> .3                    | . ft. to   | 45                       | ft., Fro   | m  | ft.                                  | $\text{to}\dots\dots\dots$ |                |
|  |  |                             | From              |                                | ft. to   | _                        | ft., Fro   | <u> </u>                                   | ft.                                  | to                         | ft.            |
| _  | MATERIAL   | •                           |                   | 2 Sement gr                    |  | 3)Bento                  |  | Other                                      |                                      |                            | .₹             |
| Grout Interva  |  |                             | .ft. to           | ft., Fro                       | om   | π.                       |  | ft., From                                  | •                                    |                            |                |
| What is the nearest source of possible contamination:            |  |                             | 7 Di+             |                                |  | stock pens               | <ul><li>14 Abandoned water well</li><li>15 Oil well/Gas well</li></ul> |  |                                      |                            |                |
| 1 Septic tank 4 Lateral lines                                    |  |                             |                   | 7 Pit privy<br>8 Sewage lagoon |  |                          | <ul><li>11 Fuel storage</li><li>12 Fertilizer storage</li></ul>        |  | / 16 Other (specify below)           |                            |                |
| 2 Sewer lines 5 Cess pool 3 Watertight sewer lines 6 Seepage pit |  |                             |                   |                                |  |                          | cticide storage  | Chi  |                                      | Creek                      |                |
| Direction from   | •  | wish                        | rago pit          | 5.0                            | ouyu.u   |                          |  | iny feet?                                  | <b>D</b>                             | •                          |                |
| FROM   | ТО   |                             | LITHOLOGI         | C LOG                          |  | FROM                     | ТО   |  |                                      | INTERVALS                  |                |
| D  | 2  | Clary                       | <u></u>           |                                |  |                          |  |  |                                      |                            |                |
| 2  | 25   | Sand                        | ,<br>             |                                |  |                          |  |  |                                      |                            |                |
|  |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
|  |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
|  |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
|  |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
| <u> </u>   |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
|  |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
|  |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
|  |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
|  |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
|  |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
|  |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
|  |  |                             |                   |                                |  |                          |  |  |                                      |                            |                |
| 7 CONTRA   | CTOR'S   | OR LANDOMNE                 | R'S CERTIFICA     | TION: This wat                 | er well was  | onstru                   | cted, (2) rec  | onstructed, or (3<br>ord is true to the    | ) plugged u                          | nder my jurisdio           | tion and was   |
|  |  |                             |                   |                                |  |                          | and this reco  | ord is true to the                         | best of my                           | (nowledge and I            | belief. Kansas |
|  |  | s License No.               |                   |                                | Water Well R                                       | ecord wa                 | _  | on (morday/yr)                             | 00-1                                 | 717011                     |                |
|  |  | me of GROU                  |                   |                                | 11 04() 6 Y  | , 41)                    | by (signa  |  | V F- 1                               | many                       | D              |
| INSTRUCT   | IONS: Use ty   | pewriter or ball point      | pen. PLEASE PRES. | SFIRMLY and PRIN               | <u>/</u> clearly. Please fill<br>e: 913-296-5545 S | in blanks,<br>end one to | underline or circle  | e the correct answer                       | s. Send top three<br>e for vour reco | e copies to Kansas<br>rds. | Department     |