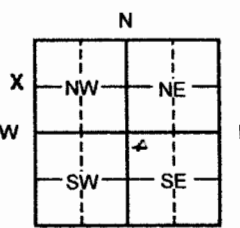


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL:	Fraction NW ¼ Nw ¼ SE ¼	Section Number 3	Township Number T 27 S	Range Number R 2 E
County: Sedgwick				
Distance and direction from nearest town or city street address of well if located within city? 12117 E. Mainsgate		Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: Smith & Co. RR#, St. Address, Box # : P.O. Box 758 City, State, ZIP Code : Andover, KS 67002				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL 90 ft.
	Depth(s) Groundwater Encountered _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 41 ft. below land surface measured on mo/day/yr _____ Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield 20 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 Feed lot 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 x ; If yes, mo/day/yr _____ Sample was submitted _____ Water Well Disinfected? Yes x 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) _____
2 PVC	4 ABS	7 Fiberglass	_____ Welded _____
Blank casing diameter _____ in. to 30 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.			Threaded _____
Casing height above land surface 12 in., Weight 2.40 lbs./ft. Wall thickness or gauge No. 160psi			
TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel	3 Stainless steel	5 Fiberglass	7 PVC
2 Brass	4 Galvanized steel	6 Concrete tile	8 RM (SR)
SCREEN OR PERFORATION OPENINGS ARE:		9 ABS	11 Other (specify) _____
1 Continuous slot	3 Mill slot	5 Guaze wrapped	7 Torch cut
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw Cut
SCREEN-PERFORATED INTERVALS:		9 Drilled holes	11 None (open hole)
From 30 ft. to 90 ft.		10 Other (specify) _____	
GRAVEL PACK INTERVALS:			
From 20 ft. to 90 ft.			
From _____ ft. to _____ ft.			
From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite
Grout Intervals From 3 ft. to 20 ft.	From _____ ft. to _____ 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
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage
Direction from well? South		How many feet? 20ft	
		13 Insecticide Storage	16 Other (specify below)
		14 Abandoned water well	
		15 Oil well/ gas well	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top Soil			
1	22	Clay			
22	75	Limestone			
75	90	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) **4-24-2007** and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. **740** This Water Well Record was completed on (mo/day/year) **4-25-2007**

under the business name of **Weninger Drilling Inc.** by (signature) *Kelsey Weninger*

INSTRUCTIONS: Please fill in blanks 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>.