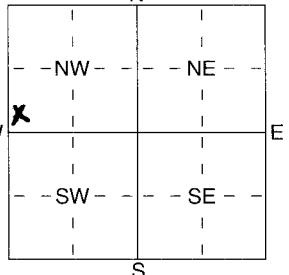


~~F-2~~ 027049

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

F-7

1 LOCATION OF WATER WELL:	Fraction County: <b>Butler</b>	SW $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$	Section Number <b>22</b>	Township Number <b>27</b>	Range Number <b>R 4 E/W</b>		
Distance and direction from nearest town or city street address of well if located within city? <b>2300 ft. W. 1315 Monoy St. Augusta, KS</b>							
2 WATER WELL OWNER:	Kaneb Pipeline						
RR#, St. Address, Box #	1624 W Sunset Rd.						
City, State, ZIP Code	El Dorado, KS 67042						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL ..... <b>15</b> ft. ELEVATION: ..... 						
Depth(s) Groundwater Encountered 1 ..... ft. 2 ..... ft. 3 ..... ft. WELL'S STATIC WATER LEVEL ..... ft. below land surface measured on mo/day/yr Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Est. Yield ..... 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) <b>10 Monitoring well</b>  Was a chemical/bacteriological sample submitted to Department? Yes ..... No ..... ; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <b>No</b>							
5 TYPE OF BLANK CASING USED:	1 Steel <b>2 PVC</b>	3 RMP (SR) 4 ABS	5 Wrought iron 6 Asbestos-Cement 7 Fiberglass	8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued ..... Clamped ..... Welded ..... Threaded ..... <b>Flush</b>		
Blank casing diameter	2	in. to	5 ft., Dia.	in. to	ft., Dia. in. to ft.		
Casing height above land surface	Flush	in., weight	703	lbs./ft.	Wall thickness or guage No. <b>5/8</b>		
TYPE OF SCREEN OR PERFORATION MATERIAL:	1 Steel 2 Brass	3 Stainless Steel 4 Galvanized Steel	5 Fiberglass 6 Concrete tile	7 PVC 8 RMP (SR) 9 ABS	10 Asbestos-Cement 11 Other (Specify) 12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE:	1 Continuous slot 2 Louvered shutter	3 Mill slot 4 Key punched	5 Guazed wrapped 6 Wire wrapped 7 Torch cut	8 Saw cut 9 Drilled holes 10 Other (specify)	11 None (open hole) ft.		
SCREEN-PERFORATED INTERVALS:	From 5	ft. to 15	ft., From	ft. to	ft.		
GRAVEL PACK INTERVALS:	From 4	ft. to 15	ft., From	ft. to	ft.		
6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other			
Grout Intervals:	From 1	ft. to 4	ft., From	ft. to	ft.		
What is the nearest source of possible contamination:	1 Septic tank 2 Sewer lines 3 Watertight sewer lines	4 Lateral lines 5 Cess pool 6 Seepage pit	7 Pit privy 8 Sewage lagoon 9 Feedyard	10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage	14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)		
Direction from well?	How many feet?						
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS	
0	15'	<b>Clay, brown, silty wet @ 10'</b>					
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) <b>8-2-02</b>					and this record is true to the best of my knowledge and belief. Kansas	
Water Well Contractor's Licence No	531					This Water Well Record was completed on (mo/day/yr) <b>9-15-02</b>	
under the business name of	<b>Geotechnical Services Inc.</b>					by (signature) <b>Gregg Cleary</b>	
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send out three copies to Kansas Department of Health.							

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) 8-2-03 and this record is true to the best of my knowledge and belief. Kansas

completed on (mo/day/year) 8-2-02 and this record is true to the best of my knowledge and belief. Kansas  
Water Well Contractor's Licence No 531 This Water Well Record was completed on (mo/day/yr) 9-15-02  
under the business name of Geoteknical Services, Inc. by (signature) John W. Schaefer

INSTRUCTIONS: Use typewriter or ball point pen. **PLEASE PRESS FIRMLY** and **PRINT** clearly. Please fill in blanks, underline or circle the correct answers. Send one copy 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.