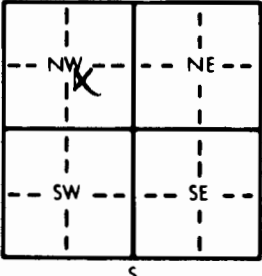


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## WATER WELL RECORD Form WWC-5 KSA 82a-1212

|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                 |                                                   |                                          |                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------------------------------------------------------------------------------------------------|---------------------------------------------------|------------------------------------------|-----------------|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                                        |          | Fraction                                                                                        | Section Number                                    | Township Number                          | Range Number    |
| County: <u>SEPC-WICK</u>                                                                                                                                                                                                                                                                                                                                                                                                                         |          | <u>NW 1/4 SE 1/4 NW 1/4</u>                                                                     | <u>32</u>                                         | T <u>28</u> S                            | R <u>1E</u> E/W |
| Distance and direction from nearest town or city street address of well if located within city?<br><u>Not Platted</u>                                                                                                                                                                                                                                                                                                                            |          |                                                                                                 |                                                   |                                          |                 |
| 2 WATER WELL OWNER: <u>WALTERS-MORGAN INC.</u>                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                 |                                                   |                                          |                 |
| RR#, St. Address, Box # : <u>PO Box 1687</u>                                                                                                                                                                                                                                                                                                                                                                                                     |          |                                                                                                 | Board of Agriculture, Division of Water Resources |                                          |                 |
| City, State, ZIP Code : <u>MANHATTAN KS 66502</u>                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                 | Application Number:                               |                                          |                 |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                             |          | 4 DEPTH OF COMPLETED WELL: <u>30</u> ft. ELEVATION:                                             |                                                   |                                          |                 |
| <div style="text-align: center;">N<br/>W      E<br/>S      S</div>                                                                                                                                                                                                                                                                                               |          | Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.                            |                                                   |                                          |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          | WELL'S STATIC WATER LEVEL <u>10</u> ft. below land surface measured on mo/day/yr <u>3-26-84</u> |                                                   |                                          |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          | Pump test data: Well water was .... ft. after .... hours pumping .... gpm                       |                                                   |                                          |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          | Est. Yield .... gpm: Well water was .... ft. after .... hours pumping .... gpm                  |                                                   |                                          |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          | Bore Hole Diameter .... in. to .... ft., and .... in. to .... ft.                               |                                                   |                                          |                 |
| WELL WATER TO BE USED AS:                                                                                                                                                                                                                                                                                                                                                                                                                        |          | 5 Public water supply 8 Air conditioning 11 Injection well                                      |                                                   |                                          |                 |
| 1 Domestic <u>WAS</u> 3 Feedlot 6 Oil field water supply 9 <u>Dewatering</u> 12 Other (Specify below)                                                                                                                                                                                                                                                                                                                                            |          |                                                                                                 |                                                   |                                          |                 |
| 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well                                                                                                                                                                                                                                                                                                                                                                             |          |                                                                                                 |                                                   |                                          |                 |
| Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted                                                                                                                                                                                                                                                                                                                           |          |                                                                                                 |                                                   |                                          |                 |
| Water Well Disinfected? Yes No                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                 |                                                   |                                          |                 |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                                     |          |                                                                                                 |                                                   |                                          |                 |
| 1 <u>Steel</u> 3 RMP (SR)                                                                                                                                                                                                                                                                                                                                                                                                                        |          | 5 Wrought iron 8 Concrete tile                                                                  |                                                   | CASING JOINTS: Glued ..... Clamped ..... |                 |
| 2 PVC 4 ABS                                                                                                                                                                                                                                                                                                                                                                                                                                      |          | 6 Asbestos-Cement 9 Other (specify below)                                                       |                                                   | Welded .....                             |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          | 7 Fiberglass                                                                                    |                                                   | Threaded .....                           |                 |
| Blank casing diameter <u>12</u> in. to <u>18</u> in. Dia. .... in. to .... ft., Dia. .... in. to .... ft.                                                                                                                                                                                                                                                                                                                                        |          |                                                                                                 |                                                   |                                          |                 |
| Casing height above land surface <u>30</u> in., weight .... lbs./ft. Wall thickness or gauge No. ....                                                                                                                                                                                                                                                                                                                                            |          |                                                                                                 |                                                   |                                          |                 |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                          |          |                                                                                                 |                                                   |                                          |                 |
| 1 <u>Steel</u> 3 Stainless steel 5 Fiberglass                                                                                                                                                                                                                                                                                                                                                                                                    |          | 7 PVC 10 Asbestos-cement                                                                        |                                                   |                                          |                 |
| 2 Brass 4 Galvanized steel 6 Concrete tile                                                                                                                                                                                                                                                                                                                                                                                                       |          | 8 RMP (SR) 11 Other (specify) .....                                                             |                                                   |                                          |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          | 9 ABS 12 None used (open hole)                                                                  |                                                   |                                          |                 |
| SCREEN OR PERFORATION OPENINGS ARE:                                                                                                                                                                                                                                                                                                                                                                                                              |          |                                                                                                 |                                                   |                                          |                 |
| 1 Continuous slot 3 Mill slot 5 Gauzed wrapped                                                                                                                                                                                                                                                                                                                                                                                                   |          | 8 Saw cut 11 None (open hole)                                                                   |                                                   |                                          |                 |
| 2 Louvered shutter 4 Key punched 6 Wire wrapped                                                                                                                                                                                                                                                                                                                                                                                                  |          | 9 Drilled holes                                                                                 |                                                   |                                          |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          | 7 Torch cut 10 Other (specify) .....                                                            |                                                   |                                          |                 |
| SCREEN-PERFORATED INTERVALS: From <u>18</u> ft. to <u>30</u> ft., From .... ft. to .... ft.                                                                                                                                                                                                                                                                                                                                                      |          |                                                                                                 |                                                   |                                          |                 |
| GRAVEL PACK INTERVALS: From .... ft. to .... ft., From .... ft. to .... ft.                                                                                                                                                                                                                                                                                                                                                                      |          |                                                                                                 |                                                   |                                          |                 |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....                                                                                                                                                                                                                                                                                                                                                                         |          |                                                                                                 |                                                   |                                          |                 |
| Grout Intervals: 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 14 Abandoned water well                                                       |                                                   |                                          |                 |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon                                                                                                                                                                                                                                                                                                                                                                                                        |          | 11 Fuel storage 15 Oil well/Gas well                                                            |                                                   |                                          |                 |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard                                                                                                                                                                                                                                                                                                                                                                                                |          | 12 Fertilizer storage 16 Other (specify below)                                                  |                                                   |                                          |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          | 13 Insecticide storage                                                                          |                                                   |                                          |                 |
| Direction from well? How many feet?                                                                                                                                                                                                                                                                                                                                                                                                              |          |                                                                                                 |                                                   |                                          |                 |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                             | TO       | LITHOLOGIC LOG                                                                                  | FROM                                              | TO                                       | LITHOLOGIC LOG  |
| <u>30</u>                                                                                                                                                                                                                                                                                                                                                                                                                                        | <u>3</u> | <u>Coarse Sand Cement</u>                                                                       |                                                   |                                          |                 |
| <u>3</u>                                                                                                                                                                                                                                                                                                                                                                                                                                         | <u>0</u> | <u>Native Coarse Sand</u>                                                                       |                                                   |                                          |                 |
| Due to soil and weather conditions, wells caved in and were topped off with native topsoil and compacted.                                                                                                                                                                                                                                                                                                                                        |          |                                                                                                 |                                                   |                                          |                 |
| City of Haysville, Kansas<br>EPA Project No. C200685                                                                                                                                                                                                                                                                                                                                                                                             |          |                                                                                                 |                                                   |                                          |                 |
| 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) <u>3-26-84</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... This Water Well Record was completed on (mo/day/yr) <u>4-23-84</u> under the business name of .... by (signature) <u>[Signature]</u> |          |                                                                                                 |                                                   |                                          |                 |
| INSTRUCTIONS: Use typewriter or ball point pen, <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.                                                               |          |                                                                                                 |                                                   |                                          |                 |