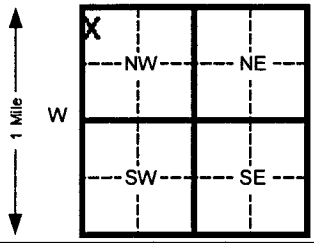


1 LOCATION OF WATER WELL:		Fraction	TOWN WELL RECORD		FORM WWR-1	Section Number		Township Number		Range Number	
County: SEDGWICK		NW ¼	NW ¼	NW ¼	21	T	29	S	R	1	E
Distance and direction from nearest town or city street address of well if located within city? 9606 S BROADWAY, WACO KS											
2 WATER WELL OWNER: KDHE TIME & MATERIALS											
RR#, St. Address, Box # : MARVIN USED CARS Board of Agriculture, Division of Water Resources											
City, State, ZIP Code : U2-087-12452 Application Number:											
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 15.5 ft. ELEVATION:									
		Depth(s) Groundwater Encountered 1 10 ft. 2 _____ ft. 3 _____ ft.									
		WELL'S STATIC WATER LEVEL 8.24 ft. below land surface measured on mo/day/yr 4/10/01									
		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 4.25 In. to 15.5 ft. and _____ in. to _____ Ft.									
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 Lawn and garden (domestic) 10 Monitoring well MW-5											
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was Submitted _____ Water Well Disinfected? Yes _____ No X											
5 TYPE OF BLANK CASING USED:											
1 Steel 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 X											
Blank casing diameter 2 in. to 4.5 Ft., Dia _____ In. to _____ ft., Dia _____ in. to _____ ft.											
Casing height above land surface FLUSH in., weight SCH 40 Lbs./ft. Wall thickness or gauge No. _____											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
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:											
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 4.5 ft. to 15.5 ft. From _____ ft. to _____ ft.											
From _____ ft. to _____ ft. From _____ ft. to _____ ft.											
SAND PACK INTERVALS: From 3 Ft. to 15.5 ft. From _____ ft. to _____ ft.											
From _____ ft. to _____ ft. From _____ ft. to _____ ft.											
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____											
Grout Intervals From3 3 ft. to 1 Ft. From2 1 to 0 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)											
Contaminated Site											
Direction from well? _____ How many feet? _____											
FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS											
0 4.5 SILT W CLAY											
4.5 15.5 SAND											
15.5 TD END OF BOREHOLE											
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w											
Completed on (mo/day/yr) 4/4/01 And this record is true to the best of my knowledge and belief. Kansas											
Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 4/15/01											
under the business name of Associated Environmental, Inc. By (signature) Darin R Duncan											
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.											