

MW-9

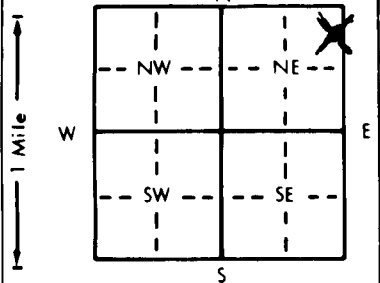
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: Fraction NE 1/4 NE 1/4 NE 1/4 Section Number 28 Township Number T 2 S Range Number R 1 E
 County: WASHINGTON

Distance and direction from nearest town or city street address of well if located within city? WEST SIDE OF KANE
WELL LOCATED 230' SOUTH OF INTERSECTION OF MAIN ST AND KANE ST IN HADDAM, KS

2 WATER WELL OWNER: KANSAS DEPT OF HEALTH AND ENVIRONMENT
 RR#, St. Address, Box #: FORBES FIELD BLDG 740 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: TOPEKA, KS 66620 Application Number: MW-9

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 33' ft. ELEVATION: 1413.29 (TOG)
 Depth(s) Groundwater Encountered 1. 26 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 19.40 ft. below land surface measured on mo/day/yr 4/15/98

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: 8 1/4 in. to 33 ft., and _____ in. to _____ ft.
 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 Lawn and garden only 10 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No 10; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes _____ No 10

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 7 Fiberglass _____ Welded _____
 Blank casing diameter 2 in. to 23' ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
 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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) 0/0

SCREEN-PERFORATED INTERVALS: From 33 ft. to 23 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 33 ft. to 20 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: From 20 ft. to 1 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage GRAIN SILO
 Direction from well? NORTH How many feet? 200

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	20	Red Clayey Silt			
20	31	BRN + Gray Sand			
31	33	Gray 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) 4-15-98 and this record is true to the best of my knowledge and belief. Kansas
 Water Well Contractor's License No. 568 This Water Well Record was completed on (mo/day/yr) 4-15-98
 under the business name of MAXS by (signature) David Hunsley

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