

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

MW-40

1 LOCATION OF WATER WELL: County: Washington Fraction NW 1/4 SW 1/4 NE 1/4 Section Number 9 Township Number T 2 S Range Number R 5 CW Distance and direction from nearest town or city street address of well if located within city? Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: 39.89385 Longitude: -96.8717 Elevation: 1324.55 Datum: Data Collection Method:

2 WATER WELL OWNER: United States Dept of Agriculture RR#, St. Address, Box # : Attn: Mr Steve Gilmore City, State, ZIP Code : 1400 Independence Ave SW Washington, DC 20250-0513

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E S 4 DEPTH OF COMPLETED WELL 30 ft. 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) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes..... No X.....; If yes, mo/day/yrs Sample was submitted..... Water well disinfected? Yes..... No X.....

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued..... Clamped..... 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded..... 2 PVC 4 ABS 7 Fiberglass Threaded... Flush Blank casing diameter in. to ft., Diameter..... in. to ft., Diameter..... in. to ft. Casing height above land surface..... in., Weight.....lbs./ft. Wall thickness or guage No. GRAVEL PACK INTERVALS: From..... ft. to ft., From..... ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other concrete Grout Intervals: From 18 ft. to 2 ft., From 2 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 13 Insecticide Storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well Direction from well? How many feet?

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Rows: 0-8 Brn CLAY w/ gravel, 8-17 Pushed COBBLE, 17-18.5 COBBLE, 18.5-31 Tan weathered BEDROCK, 31-35 Grey weathered 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) 03/05/2009... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 658 This Water Well Record was completed on (mo/day/year) 03/09/2009 under the business name of Boart Longyear by (signature) [Signature]

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, 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/index.html.