

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

MW-42

1 LOCATION OF WATER WELL: County: Washington Fraction: 1/4 NW 1/4 NE 1/4 Section Number: 9 Township Number: T 2 S Range Number: R 5 EW

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: [Diagram showing a 2x2 grid with 'X' in the NW quadrant] 4 DEPTH OF COMPLETED WELL: 28 ft.

5 TYPE OF CASING USED: 2 PVC 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued, Clamped, Welded, Threaded, Flush. TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 11 Other (Specify) 11 None (open hole)

6 GROUT MATERIAL: 4 Other Concrete Grout Intervals: From 6 ft. to 2 ft. What is the nearest source of possible contamination: 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Rows include: 0-5 Brn CLAY w/ gravel, 5-24 Tan weathered SHALE, 24-26 Grey weathered SHALE, 26-29 Tan weathered SHALE, 29-34 Red 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) 03/24/2009.

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.