

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

MW-455

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: 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: 30 ft.

5 TYPE OF CASING USED: 2 PVC 5 Wrought Iron 8 Concrete tile CASING JOINTS: Flush 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)

6 GROUT MATERIAL: 4 Other concrete Grout Intervals: From 18 ft. to 2 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)

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Rows include: 9 to 16 Bron CLAY w/ gravel, 16 to 30 Tan weathered BEDROCK, 16 to 30 Grey + 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) 03/28/2009.

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.