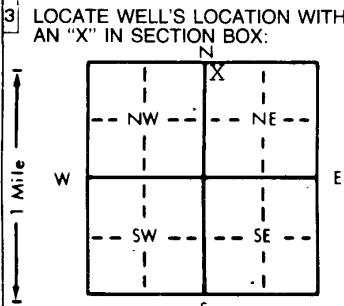


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: <u>LEAVENWORTH</u>	Fraction NW 1/4 NW 1/4 NE 1/4	Section Number <u>XX</u> 19	Township Number T 8 S	Range Number R 21E <u>(EW)</u>
--	--	--------------------------------	-----------------------------	-----------------------------------

Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: City of Easton WELL #3 Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box # : EASTON, KS 66020 Application Number:



4 DEPTH OF COMPLETED WELL: 60 ft. ELEVATION: _____ ft.

Depth(s) Groundwater Encountered 1. 50 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL: 28'-3" ft. below land surface measured on mo/day/yr 5-22-89

Pump test data: Well water was 43'-8.3" after 1 hr hours pumping 20 gpm

Est. Yield 3820 gpm: Well water was 44'-0" ft. after 3 hr hours pumping 20 gpm

Bore Hole Diameter: 24" in. to _____ 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
2 Irrigation	4 Industrial	9 Dewatering
	7 Lawn and garden only	12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes X No _____; If yes, mo/day/yr sample was submitted 3-18-89 Water Well Disinfected? Yes X No _____

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded <u>X</u> _____
		7 Fiberglass		Threaded _____

Blank casing diameter: 6" in. to 0-50' ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.

Casing height above land surface: 24" in., weight 3.67 lbs./ft. Wall thickness or gauge No. .280

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify) _____
				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 <u>.030</u>	9 Drilled holes	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From 50 ft. to 60 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 24 ft. to 60 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Intervals: From 4 ft. to 24 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 <u>Sewer lines</u>	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)
			13 Insecticide storage	

Direction from well? S How many feet? 150

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	19	Clay-Brown-Silty			
19	51	Clay-Blue-Silty			
51-54		Fine Sand-Blue-Silty			
54	56	Fine Sand-Coarse Sand-Blue			
56		Grey 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) 5-12-89 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 182 This Water Well Record was completed on (mo/day/yr) 7-29-89 under the business name of STRADER DRILLING CO., INC. 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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY