

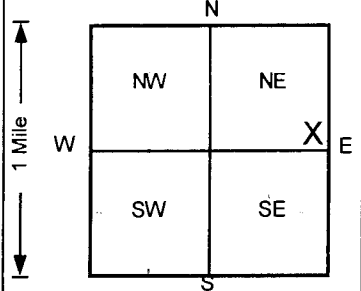
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: Clay	Fraction SE ¼ SE ¼ NE ¼	Section Number 7	Township Number T 8 S	Range Number R 3 E
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Distance and direction from nearest town or city street address of well if located within city?
Fourth Street and Grant Street

2 WATER WELL OWNER: **Don's Electronics**
 RR#, St. Address, Box # : **330 Grant Street** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Clay Center, Kansas 67432** Application Number:

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



4 DEPTH OF COMPLETED WELL **27** ft. ELEVATION:

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

Bore Hole Diameter **8** in. to **27** 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)**
Soil Vapor Extractio.
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes.....No; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes No

5 TYPE OF BLANK 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.

Blank casing diameter **2** in. to ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface in. weight lbs./ft. Wall thickness or gauge No. **Sch. 40**

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)

SCREEN-PERFORATED INTERVALS: From **22** ft. to **27** ft., From ft. to ft.
 From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From ft. to 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 Compacted Silted Clays**

Grout Intervals: From **27** ft. to **3** ft., From **3** ft. to **0** 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 Sewer lines	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) Former UST Basin

Direction from well? **West** How many feet? **60**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			27	3	Bentonite Chips
			3	0	Compacted Silted Clays
					SVE-2 (Plug) , Tag # 190514 ,
					Project Name: Don's Electronics - Remedial
					GeoCore # 449 , KDHE # U5 014 10314

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) **4/10/98** and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. **527** This Water Well Record was completed on (mo/day/yr) **4/20/98**
 under the business name of **GeoCore Services, Inc.** by (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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T R E W SEC. 1/2 1/2 1/2