

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: POTTAWATOMIE Fraction NW 1/4 NW 1/4 SW 1/4 Section Number 25 Township Number T 8 S Range Number R 8 E

2 WATER WELL OWNER: SCOTT SCHAARZ RR#, St. Address, Box #: 1070 MUD CREEK RD City, State, ZIP Code: WESTMORELAND, KS 66549

3 LOCATE WELL'S LOCATION WITH AN 'X' IN SECTION BOX: Grid showing NW, NE, SW, SE sections with an 'X' in the NW section.

4 DEPTH OF COMPLETED WELL: 100 ft. Depth(s) Groundwater Encountered (1) 15 ft. (2) - ft. (3) - ft. WELL'S STATIC WATER LEVEL: 9 ft. below land surface measured on 9/25/06.

5 TYPE OF CASING USED: 1 Steel, 3 RMP (SR), 6 Asbestos-Cement, 9 Other (specify below) CASING JOINTS: Glued, Clamped, Welded, Threaded.

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel, 3 Stainless Steel, 5 Fiberglass, 7 PVC, 9 ABS, 11 Other (Specify) 2 Brass, 4 Galvanized Steel, 6 Concrete tile, 8 RM (SR), 10 Asbestos-Cement, 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot, 3 Mill slot, 5 Gauzed wrapped, 7 Torch cut, 9 Drilled holes, 11 None (open hole) 2 Louvered shutter, 4 Key punched, 6 Wire wrapped, 8 Saw Cut, 10 Other (specify)

SCREEN-PERFORATED INTERVALS: From 10 ft. to 20 ft., From 90 ft. to 100 ft., GRAVEL PACK INTERVALS: From 8 ft. to 100 ft.

6 GROUT MATERIAL: 1 Neat cement, 2 Cement grout, 3 Bentonite, 4 Other Grout Intervals: From 2 ft. to 8 ft., From - ft. to - ft., From - ft. to - ft.

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Rows show depth intervals and lithology: 0-9 CLAY, 9-15 LIMESTONE H2O, 15-19 SHALE, GRAY, 19-27 LIMESTONE, 27-54 SHALE, GRAY TO RED TO GRAY, 54-63 LIMESTONE, 63-67 SHALE, GRAY, 67-72 LIMESTONE, 72-100 SHALE, GRAY.

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) 9/25/06 and this record is true to the best of my knowledge and belief.

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.