

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: LEAVENWORTH Fraction NW 1/4 NW 1/4 SE 1/4 Section Number 35 Township Number T 9 S Range Number R 220 W

2 WATER WELL OWNER: Ryan Jaggard RR#, St. Address, Box #: 15035 Prairie Crossing City, State, ZIP Code: LAWRENCE, KS 66043

3 LOCATE WELL'S LOCATION WITH AN 'X' IN SECTION BOX: [Diagram showing a 3x3 grid with 'X' in the center] 4 DEPTH OF COMPLETED WELL: 180 ft.

5 TYPE OF CASING USED: 1 Steel, 2 PVC, 3 RMP (SR), 4 ABS, 5 Wrought Iron, 6 Asbestos-Cement, 7 Fiberglass, 8 Concrete tile, 9 Other (specify below) HOPE CASING JOINTS: Glued, Clamped, Welded, Threaded

6 GROUT MATERIAL: 1 Neat cement, 2 Cement grout, 3 Bentonite, 4 Other Grout Intervals: From ... ft. to ... ft. What is the nearest source of possible contamination: 1 Septic tank, 2 Sewer lines, 3 Watertight sewer lines, 4 Lateral lines, 5 Cess pool, 6 Seepage pit, 7 Pit privy, 8 Sewage lagoon, 9 Feedyard, 10 Livestock pens, 11 Fuel storage, 12 Fertilizer Storage, 13 Insecticide Storage, 14 Abandoned water well, 15 Oil well/gas well, 16 Other (specify below)

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Rows include lithologic log entries like CLAY, BROWN; SHALE; SANDSTONE, GRAY; SHALE; LEAVENWORTH; SHALE; LEAVENWORTH; SHALE; LEAVENWORTH; SHALE; LEAVENWORTH; 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) 12-2-07 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.