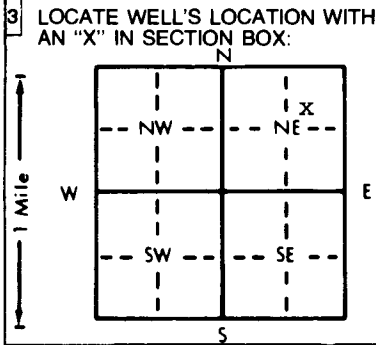


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: <u>ELLIS</u>	Fraction <u>SW 1/4 NE 1/4 NE 1/4</u>	Section Number <u>33</u>	Township Number <u>T 13 S</u>	Range Number <u>R 18 E/W</u>
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Distance and direction from nearest town or city street address of well if located within city?
1809 E 24th ST HAYS KS

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	<u>STAN NEWELL</u> <u>1809 E 24th ST</u> <u>HAYS KS 67601</u>	Board of Agriculture, Division of Water Resources Application Number:
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4 DEPTH OF COMPLETED WELL: 50 ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1. 30 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 30 ft. below land surface measured on mo/day/yr 6-10-97

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield 40 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter 10 in. to 50 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	<input checked="" type="checkbox"/> Lawn and garden only
		10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes _____ No XX; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes _____ No XX

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued <input checked="" type="checkbox"/> <u>XX</u> Clamped _____
<input checked="" type="checkbox"/> PVC	4 ABS	7 Fiberglass		Welded _____
				Threaded _____

Blank casing diameter 5 in. to 30 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface 18 in., weight 160 lbs./ft. Wall thickness or gauge No. _____

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	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	<input checked="" type="checkbox"/> Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From 30 ft. to 50 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 30 ft. to 50 ft., From _____ ft. to _____ ft.

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

GROUT INTERVALS: From 0 ft. to 30 ft., From _____ ft. to _____ 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)
			13 Insecticide storage	

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	SURFACE CLAY			
3	22	BROWN CLAY			
22	30	FINE SAND			
30	36	MED SAND			
36	40	HARD GRAY CLAY			
40	47	LARGE SAND			
47	50	SOAPSTONE			

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) 6-10-97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 444 This Water Well Record was completed on (mo/day/yr) 6-10-97 under the business name of ANDERSON DRILLING by (signature) Cindy Anderson

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.

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