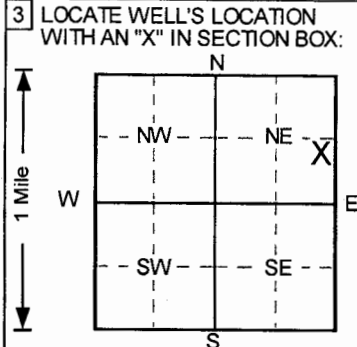


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: **Ellis** Fraction: **NE 1/4 SE 1/4 NE 1/4** Section Number: **28** Township Number: **T 13 S** Range Number: **R 18 E/W**

Distance and direction from nearest town or city street address of well if located within city?
3701 Vine, Hays

2 WATER WELL OWNER: **Holiday 66 Food Plaza**
 RR#, St. Address, Box #: **PO Box 687**
 City, State, ZIP Code: **Hays, KS 67601**
 Board of Agriculture, Division of Water Resources
 Application Number:



4 DEPTH OF COMPLETED WELL: **28** 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 **NA** ft after _____ hours pumping _____ gpm
 Est. Yield **NA** gpm: Well water was _____ ft after _____ hours pumping _____ gpm
 Bore Hole Diameter **6** in. to **28** 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)**
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well **Air sparge**
 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: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded
 Blank casing diameter **2** in. to **26** ft, Dia _____ in. to _____ ft, Dia _____ in. to _____ ft
 Casing height above land surface **0** in., weight _____ lbs./ft. Wall thickness or gauge No. **Sch. 40**
 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass **7** PVC 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____
 9 ABS 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 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From **26** ft to **28** ft, From _____ ft to _____ ft
 From _____ ft to _____ ft, From _____ ft to _____ ft
 GRAVEL PACK INTERVALS: From **24** ft to **28** 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 _____
 Grout intervals: From **2** ft to **24** 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? **0**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Asphalt and Sand,			
1	4	Clay, silty, plastic, Dark Grayish Brown			
4	7	Clay, silty, plastic, Brown			
7	7.5	Gravel (m), limestone clasts (fill?),			
7.5	14	Clay, silty, plastic, Gray			
14	21	Clay, very silty, plastic, Lt. Grayish Brown			
21	28	Sand (vf-c), fine to med. gravel, subrounded,			
					AS4, Flushmount
					Project Name: GF - Holiday 66 Food Plaza #2
					GeoCore # 1155, KDHE # U6 026 00747

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) **2/1/2005** 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) **2/23/05**
 under the business name of **GeoCore, Inc.** by (signature) *Don Holt*

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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