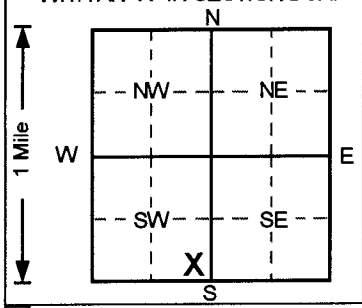
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: **Saline**	**SE ¼ SE ¼ SW ¼**	**9**	T **14** S	R **2** (E)/W

Distance and direction from nearest town or city street address of well if located within city?
3260 East Country Club Road

2 WATER WELL OWNER: **Morrison Enterprises**
RR#, St. Address, Box # : **1700 E. Iron**
City, State, ZIP Code : **Salina, Kansas 67401**
Board of Agriculture, Division of Water Resources
Application Number:

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



4 DEPTH OF COMPLETED WELL **50.5** ft. ELEVATION:
Depth(s) Groundwater Encountered 1. **15** 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 **8** in. to **50.5** 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
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 **15** ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface **24** 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 **15** ft. to **50** ft., From ft. to ft.
From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From **13** ft. to **50** 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 **0** ft. to **10** ft., From **10** ft. to **13** 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 **Unknown**
Direction from well? How many feet? **0**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Clay, Dark Gray			
3	6.5	Clay, Gray			
6.5	9	Clay, Tan to Gray			
9	11	Clay, Light Gray			
11	13	Clay, Brown			
13	15	Clay, Brown			
15	22	Clay, Brown			
22	29	Sand, Tan			
29	32	Sand and Gravel, Tan			
32	42	Sand and Gravel, Tan			
42	50	Clay, Gray			
50	50.5	Shale, Light Gray			
					MW13 , Above Ground
					Project Name: Hopkins Scoular Elevator
					GeoCore # 226 , KDHE #

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) **7/13/95** 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) **7/20/95** 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. ¼ ¼ ¼