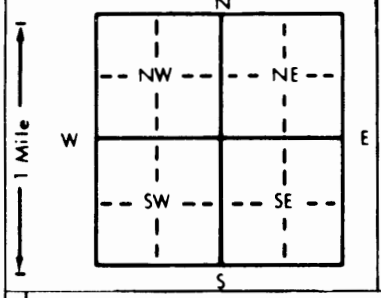
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: SALINE	NW ¼ SW ¼ SW ¼	24	T 14 S	R 3 E (W)

Distance and direction from nearest town or city street address of well if located within city?
BOGEY'S RSST. SALINA

2 WATER WELL OWNER: KOHE
RR#, St. Address, Box # : Forbes Field Bldg 740
City, State, ZIP Code : TOPEKA KS. 66620
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 40 ft. ELEVATION: 1234.48 MW-15
Depth(s) Groundwater Encountered 1. ..... ft. 2. ..... ft. 3. ..... ft.
WELL'S STATIC WATER LEVEL 27.37 ft. below land surface measured on mo/day/yr .....
Pump test data: Well water was NA ft. after ..... hours pumping ..... gpm
Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm
Bore Hole Diameter 8 in. to 40 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 X No ....; If yes, mo/day/yr sample was submitted NA
Water Well Disinfected? Yes No X

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 20 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.
Casing height above land surface 0 in., weight .716 lbs./ft. Wall thickness or gauge No. Sch 40 .154

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

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

SCREEN-PERFORATED INTERVALS: From 40 ft. to 20 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 40 ft. to 18 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 18 ft. to 2 ft., From 2 ft. to 0 ft., From ..... ft. to ..... ft.
What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
1 Septic tank 4 Lateral lines 7 Pit privy (11 Fuel storage) 15 Oil well/Gas well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage .....
Direction from well? How many feet? NA

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	7	SILT & FINE SAND			
7	31	SILT BROWN CLAY			
31	34	GREY CLAY			
34	40	MED SAND GREY & YELLOW			

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) 6-30-98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 8-3-98
under the business name of Wooster Pump & Well, Inc by (signature) Jerry L. Wooster

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