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

1 LOCATION OF WATER WELL: County: Wallace | Fraction: SE ¼ NE ¼ NE ¼ | Section Number: 34 | Township Number: T 15 S | Range Number: R 41 E/W

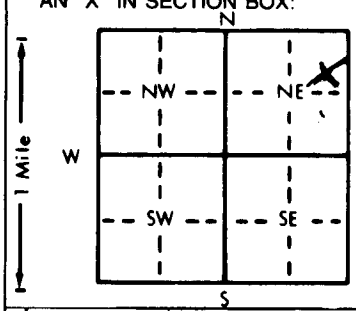
Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: John Akers
RR#, St. Address, Box # : Box 121
City, State, ZIP Code : Sharon Springs, KS67758

Murfin Drilling, Inc.
P. O. Box 661
Colby, KS 67701

Board of Agriculture, Division of Water Resources
Application Number: 98008

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



4 DEPTH OF COMPLETED WELL 250 ft. ELEVATION:

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

WELL'S STATIC WATER LEVEL 180 ft. below land surface measured on mo/day/yr .....

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

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

Bore Hole Diameter 8 in. to 250 ft., and ..... in. to ..... ft.

WELL WATER TO BE USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well 12 Other (Specify below)

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

Water Well Disinfected? Yes ..... No X

5 TYPE OF BLANK 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)

CASING JOINTS: Glued X Clamped ..... Welded ..... Threaded .....

Blank casing diameter 4.5 in. to 210 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 18 in., weight 2.38 lbs./ft. Wall thickness or gauge No. .248

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

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

SCREEN-PERFORATED INTERVALS: From 210 ft. to 250 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 20 ft. to 250 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 20 ft., From ..... ft. to ..... ft., 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) .....

Direction from well? SW How many feet? 150'

FROM	TO	LITHOLOGIC LOG
0	2	Surface
2	12	Loess
12	16	Caliche
16	23	Sandstone w/Clay Strks.
23	37	Clay & Caliche
37	43	Fine Sand
43	44	Caliche
44	66	Sandy Clay & Caliche
66	73	Fine Sand w/Clay
73	110	Sandy Clay & Caliche
110	112	Caliche
112	116	Med. Sand - Tight
116	117	Caliche
117	141	Fine to Med. Sand w/Clay & Caliche
141	145	Clay & Caliche

FROM	TO	PLUGGING INTERVALS
141	145	Clay & Caliche
145	178	Fine to Med. Sand w/Clay
178	190	Clay & Caliche
190	198	Med. Sand w/Clay
198	202	Clay
202	218	Fine Med. Sand w/Clay
218	230	Clay
230	250	Fine Med. Sand
250		Ochre & 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) 1-14-98 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) 1-15-98 under the business name of Woofter Pump & Well, Inc. by (signature) Jay C. Woofter

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