

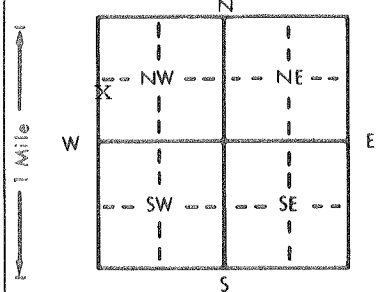
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: Fraction NW 1/4 SW 1/4 NW 1/4 Section Number 30 Township Number T 16 S Range Number R 33 EW

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

2 WATER WELL OWNER: Royal Beef Inc.  
 RR#, St. Address, Box # : 11060 N. Falcon Road Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Scott City, Ks. 67871 Application Number:

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



4 DEPTH OF COMPLETED WELL... 182 ft. ELEVATION: ...  
 Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.  
 WELL'S STATIC WATER LEVEL ... 161 . . . . . ft. below land surface measured on mo/day/yr . 12-4-96  
 Pump test data: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm  
 Est. Yield ... 47 . . . . . gpm: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm  
 Bore Hole Diameter . . 10 . . . . . in. to . 182 . . . . . 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 X2 Other (Specify below)  
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well . . . . . stock . . . . .  
 Was a chemical/bacteriological sample submitted to Department? Yes . . . . . No. X . . . . .; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued . X . . . . . Clamped . . . . .  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded . . . . .  
 X PVC 4 ABS 7 Fiberglass . . . . . Threaded . . . . .  
 Blank casing diameter . . XX 5 . . . . . in. to . 182 . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
 Casing height above land surface . . 12 . . . . . in., weight . . . . . lbs./ft. Wall thickness or gauge No. . 200 . psi  
 TYPE OF SCREEN OR PERFORATION MATERIAL: X 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 X 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 . . . . . 152 . . . . . ft. to . . . . . 182 . . . . . ft., From . . . . . ft. to . . . . . ft.  
 From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 GRAVEL PACK INTERVALS: From . . . . . 25 . . . . . ft. to . . . . . 182 . . . . . ft., From . . . . . ft. to . . . . . ft.  
 From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout X Bentonite 4 Other . . . . .  
 Grout Intervals: From . . . . . 5 . . . . . ft. to . . . . . 25 . . . . . ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 What is the nearest source of possible contamination: X 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? 500

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	top soil			
1	21	brown clay			
21	46	brown clay & gypsum			
46	56	medium to coarse sand			
56	68	brown clay & gypsum			
68	78	medium to coarse sand & gravel			
78	85	brown clay			
85	97	fine to medium sand, cemented			
97	122	fine to medium sand, few clay streaks			
122	142	brown clay			
142	166	fine to medium sand, few clay streaks			
166	172	fine to medium sand			
172	180	medium to coarse sand & gravel			
180	182	yellow clay			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (X) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) . . . . . 12-4-96 . . . . . and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . . . 532 . . . . . This Water Well Record was completed on (mo/day/yr) . 12-13-96 . . . . . under the business name of Midwest Well & Pump by (signature) Victor Schubert

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.