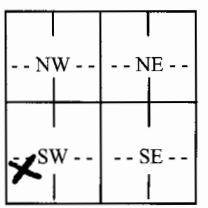


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: McPherson	Fraction NW ¼ SW ¼ SW ¼	Section Number 28	Township Number T 18 S	Range Number R 3 <input checked="" type="checkbox"/> W
Distance and direction from nearest town or city street address of well if located within city? 5 miles North of McPherson, Ks.		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: Robert Bailey RR#, St. Address, Box # : 506 Sonora Dr. City, State, ZIP Code : McPherson, Ks. 67460				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  W E S	4 DEPTH OF COMPLETED WELL112..... ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL.... 73 ft. below land surface measured on mo/day/yr 8/3/06 Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield. 15-20 gpm: Well water was.....ft. after..... hours pumping..... gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="checkbox"/> Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well
Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/>; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> No	

5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) <input checked="" type="checkbox"/> PVC 4 ABS 5 Wrought Iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued... <input checked="" type="checkbox"/> ... Clamped..... Welded..... Threaded.....
Blank casing diameter 5 in. to 92 ft., Diameter..... in. to ft., Diameter..... in. to ft. Casing height above land surface..... 24 in., Weight... 2.37lbs./ft. Wall thickness or gauge No. 214	
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <input checked="" type="checkbox"/> PVC 9 ABS 11 Other (Specify) 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM(SR) 10 Asbestos-Cement 12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot <input checked="" type="checkbox"/> Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)	
SCREEN-PERFORATED INTERVALS: From... 92 ft. to 112 ft., From..... ft. to ft. From..... ft. to ft., From..... ft. to ft.	
GRAVEL PACK INTERVALS: From... 20 ft. to 112 ft., From..... ft. to ft. From..... ft. to ft., From..... ft. to ft.	

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 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: **None within 150 ft.**

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide Storage	16 Other (specify below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer Storage	15 Oil well/gas well	

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Topsoil			
3	18	Clay, silty/lt. brown			
18	83	Clay, lt red, lt. brown			
83	98	Clay/sand, fine--layers			
98	110	Creek gravel, tan & red			
110	120	Shale, red/hard			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) ..**8/4/06**..... and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. ...**138**..... This Water Well Record was completed on (mo/day/year)**8/9/06**.....
under the business name of **Peterson Irrigation, Inc.** by (signature) *Mike Peterson*

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdhe.state.ks.us/geo/waterwells>.