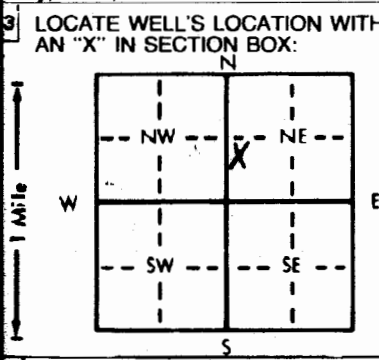


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Scott	NW 1/4 SW 1/4 NE 1/4	9	T 18 S	R 34 E/W

Distance and direction from nearest town or city street address of well if located within city?
8 W IN 1/2 W IN from Scott

2 WATER WELL OWNER: **Jess Cole**
 RR#, St. Address, Box # : **Scott City, Ks. 67871**
 City, State, ZIP Code :
 Board of Agriculture, Division of Water Resources
 Application Number:



4 DEPTH OF COMPLETED WELL: **165** ft. **ELEVATION:**

Depth(s) Groundwater Encountered **1, 120** ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL **120** 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 **26** in. to 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)	
X 2 Irrigation	4 Industrial	7 Lawn and garden only
10 Monitoring well		

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:

X 1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued.....Clamped.....
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded X
		7 Fiberglass		Threaded.....

Blank casing diameter **16** in. to ft. Dia. in. to ft. Dia. in. to ft. Dia. in. to ft.

Casing height above land surface **60** in., weight lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify) NA
2 Brass	4 Galvanized steel	6 Concrete tile	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) NA	

SCREEN-PERFORATED INTERVALS: From **NA** ft. to **NA** ft., From ft. to ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: 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 **25'** ft. to **5'** ft., From ft. to ft., From ft. to 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) NA
			13 Insecticide storage	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			0	51	cut off casing top soil
			5'	25'	Bentonite Hole Plug
			25'	165'	Sand & gravel

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) **August 5, 1994** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **473**. This Water Well Record was completed on (mo/day/yr) **8-19-94** under the business name of **Tyler Water Well Service** by (signature) *[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.