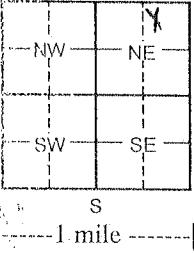
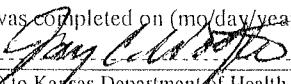


## WATER WELL RECORD

## Form WWC-5

Division of Water Resources App. No.

3993

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                      |                                                                                |     |                                            |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------------------------------------------------|-----|--------------------------------------------|--|
| LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    | Fraction<br>Wichita<br>Rural Address of Well Location; if unknown, distance & direction<br>nearest town or intersection: If at owner's address, check here <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Section Number<br>26<br>Global Positioning System (GPS) information: | Township Number<br>T 18 S<br>Range Number<br>R 37 E <input type="checkbox"/> W |     |                                            |  |
| WATER WELL OWNER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |    | Gerald J & I melda<br>Smith Trusts<br>310 N. A. ST.<br>Marienthal, KS 67863                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                      |                                                                                |     |                                            |  |
| LOCATE WELL WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                      |                                                                                |     |                                            |  |
| 4 DEPTH OF COMPLETED WELL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    | 165 ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      |                                                                                |     |                                            |  |
| Depth(s) Groundwater Encountered (1)                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |    | ft. (2)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ft. (3)                                                              | ft.                                                                            |     |                                            |  |
| WELL'S STATIC WATER LEVEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    | 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                                                                            |     |                                            |  |
| WELL WATER TO BE USED AS:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    | <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal<br><input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering<br><input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well                                                                                                                                                                                                                                                                              |                                                                      |                                                                                |     |                                            |  |
| Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                      |                                                                                |     |                                            |  |
| If yes, mo/day/yr sample was submitted                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                      |                                                                                |     |                                            |  |
| Water Well Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                   |    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                      |                                                                                |     |                                            |  |
| TYPE OF CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |    | <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other<br><input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                      |                                                                                |     |                                            |  |
| Casing diameter 4.5 in. to 145 ft., Diameter in. to                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    | ft., Diameter in. to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ft., Diameter in. to                                                 | ft.                                                                            |     |                                            |  |
| Casing height above land surface 18 in., Weight .332 lbs./ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                 |    | Wall thickness or gauge No. 5.594                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                      |                                                                                |     |                                            |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    | <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify)<br><input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole)                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                      |                                                                                |     |                                            |  |
| SCREEN OR PERFORATION OPENINGS ARE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    | <input type="checkbox"/> Continuous Slot <input type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole)<br><input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input checked="" type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify)                                                                                                                                                                                                                                                    |                                                                      |                                                                                |     |                                            |  |
| SCREEN-PERFORATED INTERVALS:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | From 145 ft. to 165 ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | From                                                                 | ft. to                                                                         |     |                                            |  |
| GRAVEL PACK INTERVALS:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    | From 20 ft. to 165 ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | From                                                                 | ft. to                                                                         |     |                                            |  |
| ROUT MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |    | <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other<br>Intervals From 0 ft. to 30 ft. From ft. to ft. From ft. to ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                      |                                                                                |     |                                            |  |
| Is the nearest source of possible contamination:                                                                                                                                                                                                                                                                                                                                                                                                                                                              |    | <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below)<br><input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well<br><input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well <input type="checkbox"/> None |                                                                      |                                                                                |     |                                            |  |
| Direction from well                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    | Distance from well                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                      |                                                                                |     |                                            |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | TO | LITHOLOGIC LOG                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                      | FROM                                                                           | TO  | LITHO. LOG (cont.) or PLUGGING INTERVALS   |  |
| 9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 2  | Surface                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      | 76                                                                             | 94  | Fine to med sand w/caliche strks & clay    |  |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 8  | Loess                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                      | 94                                                                             | 118 | Lenses                                     |  |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 22 | Caliche w/clay lenses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                      | 118                                                                            | 146 | Fine to med sand & gravel w/caliche lenses |  |
| 22                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 33 | Fine to med sand w/caliche strks                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                      | 146                                                                            | 154 | Fine to med sand w/clay & caliche lenses   |  |
| 33                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 40 | Caliche w/sand strks                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                      | 154                                                                            | 180 | Fine to med sand & small gravel            |  |
| 40                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 46 | Caliche                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      | 180                                                                            |     | Yellow ochre/black shale                   |  |
| 46                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 59 | Fine to med sd w/caliche strks & clay                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                      |                                                                                |     |                                            |  |
| 59                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 67 | Lenses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                      |                                                                                |     |                                            |  |
| 67                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 76 | Caliche                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      |                                                                                |     |                                            |  |
| 76                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    | Caliche & clay w/sand strks                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                      |                                                                                |     |                                            |  |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, <input checked="" type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged in my jurisdiction and was completed on (mo/day/year) 3-18-11 and this record is true to the best of my knowledge and belief. This Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/year) _____ by (signature)  |    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                      |                                                                                |     |                                            |  |
| INSTRUCTIONS: Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain well. Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> .                                                                        |    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                      |                                                                                |     |                                            |  |