I GCATION OF WATER WELL: Fragion County: 67 Feb. Feb	WATER WELL RECORD	Form WWC-5	Division of	Water Resources; App. N	0.	
Distance and direction from nearest town or city street address of well if located within city? IN 2N of Force IN 2N OF Force RER, St. Address, Box & 1/470 St. How 9 C. RER, St. Address, Box & 1/470 St. How 9 C. RER, St. Address, Box & 1/470 St. How 9 C. RER, St. Address, Box & 1/470 St. How 9 C. RER, St. Address, Box & 1/470 St. How 9 C. RER, St. Address, Box & 1/470 St. How 9 C. RER, St. Address, Box & 1/470 St. How 9 C. RER, St. Address, Box & 1/470 St. How 9 C. RER, St. Address, Box & 1/470 St. How 9 C. RER, St. Address, Box & 1/470 St. RESCTION BOX: R			Section Numb	er Township Numb	er Range Number	
Latitud: 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,	County: Greely	NE 1/4 3E 1/4 NW	1/4 /D			
TW 240 of More Clark Schlege Elevation: 161, 83 933	Distance and direction from nearest town or city street address of well if Global Positioning Systems (decimal degrees, min. of 4 digits)					
2 WATER WELLOWNER: Older School 1970 51 Hoge CRRS, Standers, Stock is 1970 51 Hoge CRRS, Standers, Sta	IN 2W of Horace			Langitude: 101 . 83 9.33		
RR#, St. Address, Box # 1970 57. Hosy 9 6 City, Sate, ZPF Code 3 LOCATE WELL'S LOCATION WITH ANN'N IN SECTION BOX: Depth(s) Groundwater Encountered (1) 74. ft. (2). ft. below land surface measured on moldayry. M-155. 69 Pump jest data: Well water was. L. ft. below land surface measured on moldayry. M-155. 69 Pump jest data: Well water was. L. ft. after. L. bours pumping. 2. g. gm Est. vield. 50 aprim. Well water was. L. ft. after. L. bours pumping. 2. gm WELL WATER TO BE USED AS: 5 Peblic water supply 8. Air condusting 11 Election well. Switch. Stample was submitted. 10 Department? Yes. No. X., if yes, moldayly is sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department? Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department Yes. No. X., if yes, moldayly is Sample was submitted. 10 Department Yes. No. X., if yes, moldayly is Sample was submitted. 1	2 WATER WELL OWNER: Glan Sc	hlege				
City, State, ZIP Code Tribut, S. 278 7 9 Data Collection Method: Coming Method To LOCATION MITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL	RR#, St. Address, Box # : 1470 54,	Hwy 96		VA 0 83		
3 LOCATE WELL'S LOCATION WITH AN 'X' IN SECTION BOX: SECTION BOX: N WELL WATER TO BE USED AS: 5 Pablic water supply N SECTION BOX: WELL WATER TO BE USED AS: 5 Pablic water supply SECTION BOX: WELL WATER TO BE USED AS: 5 Pablic water supply SECTION BOX: Water well distincted? Yes. N SECTION BOX: Water well distincted? Yes. N N SECTION BOX: Water well distincted? Yes. N N SECTION BOX: SETION BOX: Water well distincted? Yes. N N N SECTION BOX: SETION BOX: Water well distincted? Yes. N N N SECTION BOX: SETION BOX: SETION BOX: SETION BOX: Water well distincted? Yes. N N N SETION BOX: SETION BOX: Water well distincted? Yes. N N N SETION BOX: SETION BOX: SETION BOX: SETION BOX: Water well distincted? Yes. N N N SETION BOX: SETION BOX: Water well distincted? Yes. N N N SETION BOX: Water well distincted? Yes. N N N N SETION BOX: SETION BOX: Water well distincted? Yes. N N N N SETION BOX: SETION BOX: SETION BOX: SETION BOX: SETION BOX: SETION BOX: Water well distincted? Yes. N N N N SETION BOX: SETION BOX: SETION BOX: SETION BOX: SETION BOX: Water well distincted? Yes. N N N N SETION BOX: Water well distincted? Yes. N N N N SETION BOX: Water well distincted? Yes. N N N N SETION BOX: Water well distincted? Yes. N N N N N N SETION BOX: Water well distincted? Yes. N N N N N STINCTION BOX: SETION BOX: Water well distincted? SETION BOX: SETION BOX: SETION BOX: Water well distincted? SETION B	City, State, ZIP Code : Tribune	KS 67879	Data Collect	ion Method: Garm.	in Hand Nebel	
### SECTION BOX: SECTION BOX: N	3 LOCATE WELL'S 4 DEPTH OF COME	PLETED WELL	9.8	ft.		
SECTION BOX: N Pump test data: Well water was. T. f., f. after hours pumping. 2.0. gpm Est. Vield. 20 gpm: Well water was. T. f. after hours pumping. 2.0. gpm Est. Vield. 20 gpm: Well water was. T. f. after hours pumping. 2.0. gpm Est. Vield. 20 gpm: Well water was. T. f. after hours pumping. 2.0. gpm Est. Vield. 20 gpm: Well water was. T. f. after hours pumping. 2.0. gpm Ist. Vield. 20 gpm: Well water was. T. f. after hours pumping. 2.0. gpm Ist. Vield. 20 gpm: Well water was. T. f. after hours pumping. 2.0. gpm Ist. Vield. 20 gpm: Well water was. T. f. after hours pumping. 2.0. gpm Ist. Vield. 20 gpm: Well water was. T. f. after hours pumping. 2.0. gpm Ist. Vield. 20 gpm: Well water was. T. f. after hours pumping. 2.0. gpm Ist. Vield. 20 gpm: Well water was. T. f. after hours pumping. 2.0. gpm Ist. Vield. 20 gpm: Well water was. T. f. after hours pumping. 2.0. gpm Ist. Vield. 20 gpm: Well water was. T. f. f. after hours pumping. 2.0. gpm Ist. Vield. 20 gpm: Well water was. T. f. f. after hours pumping. 2.0. gpm Ist. Vield. 20 gpm: Well water was. T. f. f. after hours pumping. 2.0. gpm Ist. Vield. 20 gpm: Well water was. T. f. f. after hours pumping. 20 gpm Ist. Vield. 20 gpm: Well water was. T. f.						
Prump test data: Well water was. 74 ft. after hours pumping. 20. gpm with the common com	WITH AN "X" IN Depth(s) Groundwater Encountered (1)					
Est. Yield 2D. gpm: Well water was	SECTION BOX: WELL'S STATIC WATER LEVEL					
WELL WATER TO BE USED AS: S Public water supply 9 Dewatering 11 Injection well 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well 2 Unter (Specify below) Was a chemical/bacteriological sample submitted to Department? Yes	Fest Vield 50 grm: Well water was ft after hours numping grm					
Domestic Security Domestic Domestic A Feedlow Domestic						
Was a chemical/bacteriological sample submitted to Department? Yes						
Was a chemical bacteriological sample submitted to Department? Yes No If yes, mo/day/yrs Sample was submitted Water well disinfected? Yes No No Sample was submitted Water well disinfected? Yes No No Sample was submitted Water well disinfected? Yes No No Sample was submitted Water well disinfected? Yes No No Sample was submitted Water well disinfected? Yes No No Sample was submitted Water well disinfected? Yes No No Sample was submitted Weight Weight Like Sample was submitted Weight Sample was submitted Weight Sample	2 Irrigation 4 Ind	ustrial 7 Domestic (1	awn & garden) 10	Monitoring well	Livestack	
Sample was submitted	SW SE					
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued. A. Clamped	Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs					
S TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued. ★ Clamped		• • • • • • • • • • • • • • • • • • • •	water well distilled	eu: 1es No		
Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded 2 PVC 4 ABS 7 Fiberglass Threaded Steel 1 Fiberglass Threaded Steel 1 Fiberglass Steel 1 Fiberglass Steel 1 Steel 2 Steel 1 Steel		[man 9 Camanata	tile CA	CINC IOINTS, Clued	✓ Clampad	
2 PVC	1 Steel 3 RMP (SR) 6 Ashestos	Cement 9 Other (sr	ente CA	SING JOINTS: Giueu Welde		
TYPE OF SCREEN OR PERFORATION ATTERIAL: 1 Stete 3 Stainless Stete 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) 2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)	2 PVC 4 ABS 7 Fiberglass	Comen of		Thread	ded	
TYPE OF SCREEN OR PERFORATION ATTERIAL: 1 Stete 3 Stainless Stete 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) 2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)	Blank casing diameter 5 in. to 5 b.	ft., Diameter	in. to	. ft., Diameter	in. toft.	
TYPE OF SCREEN OR PERFORATION ATTERIAL: 1 Stete 3 Stainless Stete 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) 2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)	Casing height above land surface	in., Weight 26.5 .	lbs./ft. Wa	ll thickness or guage N	o 26.8	
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Guazed wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 7.6. ft. to 9 Drilled holes 11 None (open hole) SCREEN-PERFORATED INTERVALS: From 7.6. ft. to 1.6. ft. From ft. to f	TYPE OF SCREEN OR PERFORATION MATE	RIAL:				
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Guazed 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 7.6. ft. to 7.6. ft. ft. From ft. to ft. From ft. From ft. From ft. To ft	1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)					
1 Continuous slot 3 Mill slot 5 Guazed wrapped 7 Torch cut 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)						
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 7.6. ft. to 9.6. ft., From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. GRAVEL PACK INTERVALS: From 3.7. ft. to ft. From ft. to ft. GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From ft. to ft. What is the nearest source of possible contamination: Septic fants 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well 50 il well/gas well 60 il						
From fi. to fi.	2 Louvered shutter 4 Key punched 6 W	ire wrapped 8 Saw	Cut_ 10 Other (sp	pecify)	••••	
From	SCREEN-PERFORATED INTERVALS: From					
From	From					
6 GROUT MATERIAL: I Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From 0 ft. to 2 ft., From ft. to ft. What is the nearest source of possible contamination: Septic tails 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well Direction from well?						
Grout Intervals: From	It. W					
What is the nearest source of possible contamination: Septic lank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well	6 GROUT MATERIAL: 1 Neat cement 2	Cement grout 3 Benton	ite 4 Other			
4 Lateral lines 7 Pit privy 2 Sewer lines 5 Cess pool 8 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well 16 Oil well/gas well 17 Oil well/gas well 18 Oil well/gas well 19 FROM TO PLUGGING INTERVALS 10 Description of the provided of			ft. to	ft., From	ft. toft.	
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well	<u>*</u>					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard Direction from well? LITHOLOGIC LOG FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS Sandy clay S 55 Sandy clay S 55 Sandy clay S 55 Sandy clay THOLOGIC LOG FROM TO PLUGGING INTERVALS PLUGGING INTERVALS PLUGGING INTERVALS TO 9 PLUGGING INTERVALS TO 9 PLUGGING INTERVALS TO 9 PLUGGING INTERVALS TO 9 PLUGGING INTERVALS S 55 Sandy S 56 PLANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) TONTRACTOR'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) This Water Well Record was completed on (mo/day/year) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, undefine or circle the ortect 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						
Direction from well? How many feet? S. S. D. FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS Discrete FROM TO PLUGGING INTERVALS Sandy clay S. S. Sandy S. Sa					,	
25 55 5and 55 56 Hard Rock 56 56 Sand 66 74 Clay 74 65 Fine Sand 85 92 Yellow Stade 92 98 black Stade 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)		How	many feet?	1500°		
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)		LOG F	ROM TO	PLUGGING I	NTERVALS	
74 65 6 me Sand 74 65 6 me Sand 75 92 yellow 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). 4.18.19.19.19.19.19.19.19.19.19.19.19.19.19.						
74 95 fine Sand 35 92 yellow state 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)						
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). 4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	3) 36 Mard Rock					
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). 4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	1.1. 24 plan					
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). 4	74 65 640 5 md					
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)	as 92 yellow 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)	92 98 black shalp	·				
under my jurisdiction and was completed on (mo/day/year)						
under my jurisdiction and was completed on (mo/day/year)						
Kansas Water Well Contractor's License No	7 CONTRACTOR'S OR LANDOWNER'S CE	RTIFICATION: This	water well was (1) co	onstructed. (2) reconstr	ucted, or (3) plugged	
under the business name of Kemp's Well Service by (signature) By (signature) By (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, under time or circle the original to 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	under my jurisdiction and was completed on (mo/	day/year)	and this record is t	rue to the best of my ki	nawledge and belief.	
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the 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 <u>constructed</u> well. Visit us at	under the husiness name of	Inis water we	hy (signature)	(mo/day/year)		
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	INSTRUCTIONS: Use typewriter or ball point pen. PLEA	SE PRESS FIRMLY and PRIN	<u>T</u> clearly. Please fill in b	planks, underline or circle th	e or ect answers. Send top	
	three copies to Kansas Department of Health and Environment	t, Bureau of Water, Geology S	ection, 1000 SW Jackson	St., Suite 420, Topeka, Kan	sas 66612-1367. Telephone	
http://www.kdhe.state.ks.us/geo/waterwells.						

KSA 82a-1212