WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No. SV-4

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Barton	SE ¼ SW ¼ SW ¼	29	T 19 S	R 13 E/W

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

2 WATER WELL OWNER: Ambrosia Properties
RR#, St. Address, Box # : PO Box 24
City, State, ZIP Code : Great Bend, KS 67530

Board of Agriculture, Division of Water Resources Application Number:

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

N / NW / NE / W / E / SW / SE / S — X

1 Mile

4 DEPTH OF COMPLETED WELL 23 ft. ELEVATION: 1859.36

Depth(s) Groundwater Encountered 1 ____ ft. 2 ____ ft. 3 ____ ft.

WELL'S STATIC WATER LEVEL 16.65 ft. below land surface measured on mo/day/yr 4/27/05

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 11.5 in. to 23 ft. and ____ in. to ____ ft.

WELL WATER TO BE USED AS: 1 Domestic 2 Irrigation 3 Feed lot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Lawn and garden (domestic) 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well (12) Other (Specify below) Vapor extraction

Was a chemical/bacteriological sample submitted to Department? Yes ____ No X ____ If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes ____ No X

5 TYPE OF BLANK CASING USED: 1 Steel (2) PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)

CASING JOINTS: Glued ____ Clamped ____ Welded ____ Threaded X

Blank casing diameter 4 in. to 8 ft., Dia ____ in. to ____ ft., Dia ____ in. to ____ ft.

Casing height above land surface 0 in., weight 2.07 lbs./ft. Wall thickness or gauge No. .237

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile (7) PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) ____ 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut (8) Saw cut 9 Drilled holes 10 Other (specify) ____ 11 None (open hole)

SCREEN-PERFORATED INTERVALS: From 8 ft. to 23 ft. From ____ ft. to ____ ft.
From ____ ft. to ____ ft. From ____ ft. to ____ ft.

GRAVEL PACK INTERVALS: From 7 ft. to 23 ft. 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 1 ft. to 7 ft. From ____ ft. to ____ ft. From ____ ft. to ____ ft.

What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/ Gas well (16) Other (specify below) Contaminated site

Direction from well? How many feet?

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5		Cement			
0.5	3.5		Brown clay and sand fill			
3.5	5		Fine to med. sand			
5	23		Mixed sand & gravel, loose, w/			
			Lg gravel & pebbles			

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/yr) 4/27/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 6/27/05 under the business name of Woofter Pump & Well, Inc. by (signature) Jay Woofter

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T R SEC

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