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

1 LOCATION OF WATER WELL

County: Barton | Fraction: NE ¼ NE ¼ SE ¼ | Section Number: 12 | Township Number: T 19 S | Range Number: R 14 (E) W

Distance and direction from nearest town or city? 3 N of Great Bend (west side)

Street address of well if located within city?

2 WATER WELL OWNER: Wilmer Otte

RR#, St. Address, Box # : 1804 Apollo

City, State, ZIP Code : Great Bend, Ks. 67530

Board of Agriculture, Division of Water Resources Application Number:

3 DEPTH OF COMPLETED WELL 65 ft. Bore Hole Diameter 11 in. to 65 ft., and ..... in. to ..... ft.

Well Water to be used as:
(1) Domestic 3 Feedlot 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below)
2 Irrigation 4 Industrial

Well's static water level 22 ft. below land surface measured on 2 month 4 day 81 year

Pump Test Data: Well water was ..... ft. after ..... hours pumping ..... gpm

Est. Yield NA gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

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

Casing Joints: Glued ✓ Clamped ..... Welded ..... Threaded .....

Blank casing dia 5 in. to 55 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 18 in., weight ..... lbs./ft. Wall thickness or gauge No .258

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

Screen or Perforation Openings Are:
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut (8) Saw cut 9 Drilled holes 10 Other (specify) ..... 11 None (open hole)
2 Louvered shutter 4 Key punched

Screen-Perforation Dia 5 in. to 65 ft., Dia ..... in. to ..... ft., Dia ..... in to ..... ft.

Screen-Perforated Intervals: From 55 ft. to 65 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

Gravel Pack Intervals: From 10 ft. to 65 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

5 GROUT MATERIAL: (1) Neat cement 2 Cement grout 3 Bentonite 4 Other .....

Grouted Intervals: From 0 ft. to 10 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

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

Direction from well east How many feet 400' ? Water Well Disinfected? Yes HTH No

Was a chemical/bacteriological sample submitted to Department? Yes ..... No ✓ If yes, date sample was submitted ..... month ..... day ..... year: Pump Installed? Yes ✓ No .....

If Yes: Pump Manufacturer's name Red Jacket Model No. 9BC HP 1/2 Volts 230

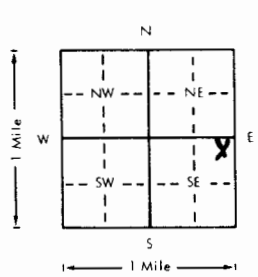
Depth of Pump Intake 42 ft. Pumps Capacity rated at 10 gal./min.

Type of pump: (1) Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 2 month 19 day 81 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134

This Water Well Record was completed on 2 month 28 day 81 year under the business name of Rosencrantz - Bemis by (signature) Lora Dodson

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



ELEVATION:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5	top soil			
5	19	sandy brown clay			
19	24	sand & gravel			
24	52	sand & gravel - clay lenses			
52	65	sand & gravel			

Depth(s) Groundwater Encountered 1. 22' ft. 2. ..... ft. 3. ..... ft. 4. ..... ft. (Use a second sheet if needed)

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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 19 R 14 E W SEC. 12 NE ¼ NE ¼ SE ¼