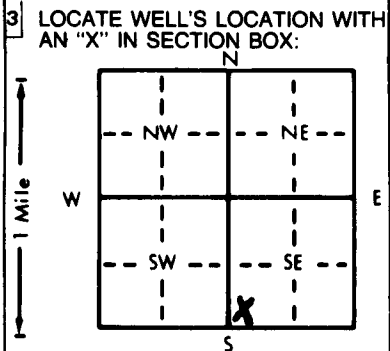


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Greeley</u>	<u>SW 1/4 SW 1/4 SE 1/4</u>	<u>28</u>	<u>T 19 S</u>	<u>R 40 E/W</u>

Distance and direction from nearest town or city street address of well if located within city?
7 miles south, 1 east of Tribune, KS

2 WATER WELL OWNER: Alan Wineinger
 RR#, St. Address, Box # : _____
 City, State, ZIP Code : Tribune, KS 67879
 Board of Agriculture, Division of Water Resources
 Application Number: _____



4 DEPTH OF COMPLETED WELL: 180 ft. ELEVATION: 3620 ft.

Depth(s) Groundwater Encountered 1. 155 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 155 ft. below land surface measured on mo/day/yr 6-12-93

Pump test data: Well water was 160 ft. after 2 hours pumping 10 gpm
 Est. Yield 25 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter 10 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)
 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 CASING USED:

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

Blank casing diameter 5 in. to 180 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. sch 40

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)	11 Other (specify)
			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)	

SCREEN-PERFORATED INTERVALS: From 160 ft. to 180 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 20 ft. to 180 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 3 Bentonite 4 Other _____

Grout Intervals: From 0 ft. to 20 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)
			13 Insecticide storage	

Direction from well? West How many feet? 100'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	14	top soil & sandy clay	167	180	yellow clay
14	16	cliche	XXXXXXXXXXXXXXXXXXXX		
16	32	cliche & little sand & clay	XXXXXXXXXXXXXXXXXXXX		
32	49	sand & little clay			
49	65	sand & gravel			
65	82	white sandy clay			
82	98	sand & gravel			
98	114	fine cemented sand			
114	132	fine cemented sand & little clay			
132	140	sand (medium)			
140	143	cemented sand (very hard)			
143	147	clay			
147	160	sandy clay			
160	164	sand (medium to coarse)			
164	167	sand (medium to coarse)			

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) 6-15-93 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) 6-16-93 under the business name of Tyler Water Well Service by (signature) Tyler Water Well Service

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.