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

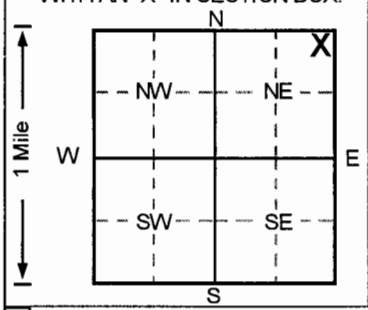
1 LOCATION OF WATER WELL: County: **McPherson**	Fraction: **NE ¼ NE ¼ NE ¼**	Section Number: **23**	Township Number: T **19** S	Range Number: R **5** E/W

Distance and direction from nearest town or city street address of well if located within city?
2 1/2 mile W, 1 mile N Conway, W side of Road

2 WATER WELL OWNER: **Mid America Pipeline Co.**
RR#, St. Address, Box # : **1800 South Baltimore Ave.**
City, State, ZIP Code : **Tulsa, OK 74101**

Board of Agriculture, Division of Water Resources Application Number:

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



4 DEPTH OF COMPLETED WELL ..... **29.5** ..... ft. ELEVATION: .....
Depth(s) Groundwater Encountered 1. ..... **18** ..... 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 ....**NA**.... ft. after ..... hours pumping ..... gpm
Est. Yield ..**NA**... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm
Bore Hole Diameter ....**8**.... in. to .....**29.5**..... 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.✓.....; If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes No ✓

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped .....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....
(2) PVC 4 ABS 7 Fiberglass ..... Threaded. ✓.....
Blank casing diameter .....**2**..... in. to .....**4.5**.... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.
Casing height above land surface .....**36**..... in., weight ..... lbs./ft. Wall thickness or gauge No. .... **Sch. 40** ....
TYPE OF SCREEN OR PERFORATION MATERIAL (7) PVC 10 Asbestos-cement
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) .....
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
1 Continuous slot (3) Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....
SCREEN-PERFORATED INTERVALS: From .....**4.5**..... ft. to .....**29.5**..... ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From .....**3.5**..... ft. to .....**29.5**..... 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 .....**0**..... ft. to .....**3**..... ft., From .....**3**..... ft. to .....**3.5**..... ft., From ..... ft. to ..... ft.
What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage (16) Other (specify below)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage ...**Unknown**.....
Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Topsoil,			
2	5	Clay, Red Brown			
5	10	Clay, Red			
10	15	Clay, Red			
15	20	Clay, Brown			
20	25	Clay, Brown			
25	29.5	Shale, Gray			
					591SO , Tag # , Abovegrade
					Project Name: Mapco
					GeoCore # 205 , #

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) .....**3/28/96**..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .....**527**..... This Water Well Record was completed on (mo/day/yr) .....**4/26/96**..... under the business name of **GeoCore Services, Inc.** by (signature) *Dale Robl*

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.