

WATER WELL RECORD

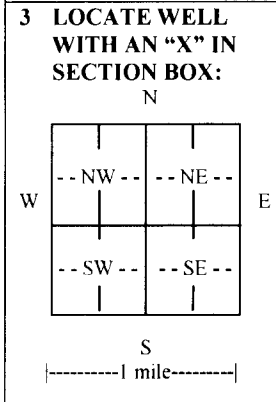
Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: JEWELL Fraction 1/4 NE 1/4 NE 1/4 NW 1/4 Section Number 31 Township No. T 1 S Range Number R 6 [] E [x] W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here []. Global Positioning System (GPS) information: Latitude: 39.9212610 Longitude: -98.0343324

2 WATER WELL OWNER: MARK SINCLAIR RR#, Street Address, Box #: 2551 2 RD City, State, ZIP Code : WEBBER KS. 66970 Datum: [] WGS 84, [x] NAD 83, [] NAD 27 Collection Method: [] GPS unit, [] Digital Map/Photo, [] Topographic Map, [] Land Survey



3 LOCATE WELL WITH AN 'X' IN SECTION BOX: 4 DEPTH OF COMPLETED WELL 97 ft. Depth(s) Groundwater Encountered (1)..... 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 97 ft. after 3 hours pumping 10 gpm EST. YIELD..... 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: [x] Domestic [] Feedlot [] Oil field water supply [] Dewatering [] Other (Specify below) [] Irrigation [] Industrial [] Domestic-lawn & garden [] Monitoring well Was a chemical/bacteriological sample submitted to Department? [x] Yes [] No If yes, mo/day/yr sample was submitted..... Water well disinfected? [] Yes [x] No

5 TYPE OF CASING USED: [] Steel [x] PVC [] Other CASING JOINTS: [x] Glued [] Clamped [] Welded [] Threaded Casing diameter 5 in. to 57 ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft. Casing height above land surface..... in., Weight..... lbs./ft., Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: [] Steel [] Stainless Steel [x] PVC [] Other (Specify) [] Brass [] Galvanized Steel [] None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: [] Continuous slot [x] Mill slot [] Gauze wrapped [] Torch cut [] Drilled holes [] None (open hole) [] Louvered shutter [] Key punched [] Wire wrapped [] Saw cut [] Other (specify) SCREEN-PERFORATED INTERVALS: From 57 ft. to 97 ft., From..... ft. to..... ft., From..... ft. to..... ft. GRAVEL PACK INTERVALS: From 37 ft. to 97 ft., From..... ft. to..... ft., From..... ft. to..... ft.

6 GROUT MATERIAL: [] Neat cement [] Cement grout [x] Bentonite [] Other Grout Intervals: From 0 ft. to 27 ft., From..... ft. to..... ft., From..... ft. to..... ft. What is the nearest source of possible contamination: [] Septic tank [] Lateral lines [] Pit privy [] Livestock pens [] Insecticide storage [] Other (specify below) [] Sewer lines [] Cesspool [] Sewage lagoon [] Fuel storage [] Abandoned water well [] Watertight sewer lines [] Seepage pit [] Feedyard [] Fertilizer storage [] Oil well/gas well Direction from well..... Distance from well.....

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS. Rows: 0-1 TOP SOIL, 1-33 TAN CLAY, 33-62 LIMESTONE TAN CLAY, 62-86 GRITTY TAN CLAY, 86-100 GRAY CLAY.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was [x] constructed, [] reconstructed, or [] plugged under my jurisdiction and was completed on (mo/day/year) 10/24/2014.... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 480..... This Water Well Record was completed on (mo/day/year) 10/31/2014 under the business name of WILLIAMS DRILLING CO., INC..... by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html