

<b>1 LOCATION OF WATER WELL:</b> County: Rice	Fraction NW 1/4 NE 1/4 NW 1/4	Section Number 17	Township Number T 20 S	Range Number R 10 E <b>(W)</b>
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Distance and direction from nearest town or city street address of well if located within city? Approximately 2 1/2 miles north and 2 1/8 miles west of Raymond

**Global Positioning Systems** (decimal degrees, min. of 4 digits)  
 Latitude: 38.318154  
 Longitude: -98.454577  
 Elevation: Unknown  
 Datum: NAD83  
 Data Collection Method: WAAS GPS Unit

**2 WATER WELL OWNER:** Mike Ringwald  
 RR#, St. Address, Box # : 655 3rd Road  
 City, State, ZIP Code : Ellinwood, KS 67526

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

N	x	
--NW--	--NE--	
W		E
--SW--	--SE--	
		S

**4 DEPTH OF COMPLETED WELL** 105 ft.  
 Depth(s) Groundwater Encountered (1) \_\_\_\_\_ ft. (2) \_\_\_\_\_ ft. (3) \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL 20 ft. below land surface measured on mo/day/yr. 06-09-08  
 Pump test data: Well water was Not checked ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield Unknown gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
**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 Domestic (lawn & garden) 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 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 12 in. to 74 ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface 12 in., weight 12.71 lbs./ft. Wall thickness or gauge No. 490  
**TYPE OF SCREEN OR PERFORATION MATERIAL:**  
 1 Steel 3 Stainless Steel 5 Fiberglass **(7)** PVC 9 ABS 11 Other (Specify) \_\_\_\_\_  
 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)  
**SCREEN OR PERFORATION OPENINGS ARE:**  
 1 Continuous slot **(3)** Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)  
 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (Specify) \_\_\_\_\_  
**SCREEN-PERFORATED INTERVALS:** From 74 ft. to 104 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
**GRAVEL PACK INTERVALS:** From 20 ft. to 105 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 \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From 0 ft. to 20 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 13 Insecticide Storage 16 Other (specify below)  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage **(15)** Oil well/gas well  
 Direction from well? Northeast How many feet? Approximately 300'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	Topsoil	78	97	Sandstone, soft, tan
5	16	Sand, coarse to very fine, loose	97	98	Clay, yellow, with streaks of sandstone
16	19	Clay, brown, sandy, soft	98	100	Sandstone, with iron pyrite streaks
19	33	Sand, coarse to very fine, loose	100	102	Clay, dark, hard
33	36	Clay, brown, white, hard	102	105	Shale, dark, hard
36	52	Clay, grayish, white, hard, sandy, with streaks of sandstone			
52	74	Clay, brown, medium, soft			
74	76	Sandstone, fine, soft, tan			
76	78	Clay, yellow and white, hard, with streaks of limestone			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was (1) **constructed** (2) reconstructed (3) plugged under my jurisdiction and was completed on (mo/day/year) 06-09-08 and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 06-18-08  
 Under the business name of Clarke Well & Equipment, Inc. by (signature) *[Signature]*