WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No. _____

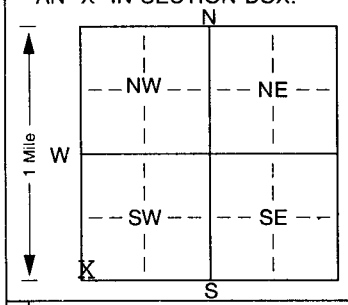
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Barton	SW ¼ SW ¼ SW ¼	22	T 20 S	R 14W E/W

Distance and direction from nearest town or city street address of well if located within city?
5S, 5W of Great Bend, Ks.

2 WATER WELL OWNER: Frank Neff
RR#, St. Address, Box # : 3205 Broadway
City, State, ZIP Code : Great Bend, Ks. 67530

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 30 ft. ELEVATION: unknown

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

WELL'S STATIC WATER LEVEL none ft. below land surface measured on mo/day/yr 3/21/02

Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm

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

Bore Hole Diameter ..... in. to ..... ft., and ..... in. to ..... ft.

WELL WATER ~~XXXX~~ was 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/yrs 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 ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 3 ft. below in., weight ..... lbs./ft. Wall thickness or gauge No. .....

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) N/C ft.

SCREEN-PERFORATED INTERVALS: From N/C ft. to ..... ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From N/C ft. to ..... 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 30 ft. to 3 ft., From ..... ft. to ..... 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 .....

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			30	3	bentonite
			3	0	top soil

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) 03/21/02 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. 186 This Water Well Record was completed on (mo/day/yr) 03/28/02 under the business name of Kelly's Water Well Service, Inc. by (signature) Kathryn L Boad

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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of $5.00 for each constructed well.