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

| LOCATION OF WATER WELL | Fraction | Section Number | Township Number | Range Number |
|---|---|---|---|---|
| ounty: Stafford | nw ¼ nw ¼ nw ¼ | 10 | T 22 S | R 12w E/W |

istance and direction from nearest town or city? le 4n Hudson, Ks.

Street address of well if located within city?

WATER WELL OWNER: Curtis Spangenberg
R#, St. Address, Box # : R3
ity, State, ZIP Code : Hudson, Ks. 67545

Board of Agriculture, Division of Water Resources Application Number: none

DEPTH OF COMPLETED WELL 92 ft. Bore Hole Diameter 5½ in. to 92 ft., and ..... in. to ..... ft.

Vell Water to be used as:
1 Domestic 3 Feedlot 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below)
2 Irrigation 4 Industrial

Vell's static water level 18 ft. below land surface measured on 12 month 12 day 78 year

ump Test Data : Well water was ..... ft. after ..... hours pumping ..... gpm
st. Yield 40 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

TYPE OF BLANK CASING USED:
1 Steel 3 RMP (SR) 5 Wrought iron 6 Asbestos-Cement 8 Concrete tile 9 Other (specify below)
2 PVC 4 ABS 7 Fiberglass

Casing Joints: Glued ..... Clamped ..... Welded ..... Threaded .....

lank casing dia 2 in. to 72 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.
asing height above land surface 12 in., weight .69 lbs./ft. Wall thickness or gauge No sch 40

YPE 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) 9 ABS 11 Other (specify) ..... 12 None used (open hole)

creen or Perforation Openings Are:
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 6 Wire wrapped 8 Saw cut 9 Drilled holes 11 None (open hole)
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....

creen-Perforation Dia 2 in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in to ..... ft.
creen-Perforated Intervals: From 72 ft. to 92 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
ravel Pack Intervals: From 10 ft. to 92 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....
routed Intervals: From 0 ft. to 10 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

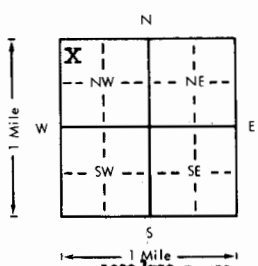
Vhat is the nearest source of possible contamination:
1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) .....

irection from well S How many feet 65 ? Water Well Disinfected? Yes ..... No .....

Vas a chemical/bacteriological sample submitted to Department? Yes ..... No ..... : If yes, date sample
as submitted ..... month ..... day ..... year: Pump Installed? Yes ..... No .....
Yes: Pump Manufacturer's name ..... Model No. ..... HP ..... Volts .....
epth of Pump Intake ..... ft. Pumps Capacity rated at ..... gal./min.
ype of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was
ompleted on 12 month 12 day 78 year.
nd this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186
his Water Well Record was completed on 2 month 22 day 80 year under the business
ame of Kellys Waterwell Serv. by (signature) Kelly Price

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




ELEVATION: unknown

| FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHOLOGIC LOG |
|---|---|---|---|---|---|
| 0 | 25 | Top Soil-Clay | | | |
| 25 | 65 | Sand-Clay | | | |
| 65 | 92 | Sand-Gravel | | | |

epth(s) Groundwater Encountered 1 25 ft. 2 ..... ft. 3 ..... ft. 4 ..... ft. (Use a second sheet if needed)

NSTRUCTIONS: 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 opies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and etain one for your records.

OFFICE USE ONLY T 22 R 12 EW SEC. 10 NW ¼ NW ¼ NW ¼ NW ¼