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

1 LOCATION OF WATER WELL: County: Pawnee | Fraction: Approx. Center of ¼ ¼ SE ¼ | Section Number: 34 | Township Number: T 22 S | Range Number: R 15 E/W

Distance and direction from nearest town or city? 6 mi. so. and 7½ mi east of Larned, KS

Street address of well if located within city?

2 WATER WELL OWNER: Kenneth Link
RR#, St. Address, Box # : P.O. Box 355
City, State, ZIP Code : Great Bend, KS 67530

Board of Agriculture, Division of Water Resources Application Number: 33,350

3 DEPTH OF COMPLETED WELL 89 ft. Bore Hole Diameter 24 in. to 89 ft., and ..... in. to ..... ft.

Well 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

Well's static water level 18'6" ft. below land surface measured on 12 month 10 day 1979 year

Pump Test Data: Well water was ..... ft. after ..... hours pumping ..... gpm
Est. Yield Not Ck'd gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

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

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

Blank casing dia 16 in. to 49 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.
Casing height above land surface 12 in., weight 31.75 lbs./ft. Wall thickness or gauge No 7 ga.

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)

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

Screen-Perforation Dia 16 in. to 89 ft., Dia ..... in. to ..... ft., Dia ..... in to ..... ft.
Screen-Perforated Intervals: From 49 ft. to 89 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
Gravel Pack Intervals: From 10 ft. to 89 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

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

What 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) Field

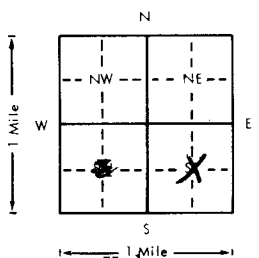
Direction from well X How many feet X ? Water Well Disinfected? Yes ..... No X

Was a chemical/bacteriological sample submitted to Department? Yes ..... No X If yes, date sample was submitted ..... month ..... day ..... year: Pump Installed? Yes X No .....

If Yes: Pump Manufacturer's name Peerless Pump Co. Model No. 12LD-2 HP 60 Volts ---
Depth of Pump Intake 80 ft. Pumps Capacity rated at 900 gal./min.
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on X 12 month 10 day 1979 year 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 5 month 13 day 1980 year under the business name of Clarke Well & Eq., Inc. by (signature) [signature]

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



ELEVATION: Unknown

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5	Top soil			
5	27	X Clay with sand			
27	72	Sand & gravel			
72	76	Clay			
76	82	Drift, sand & gravel & clay			
82	89	Clay			

Depth(s) Groundwater Encountered 1. 18'6" ft. 2. ..... ft. 3. ..... ft. 4. ..... ft. (Use a second sheet if needed)

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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 22 S R 15 E/W SEC. 34 C¼ SE¼ ¼