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

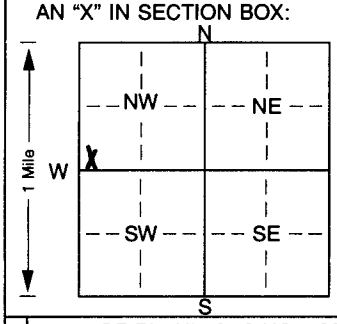
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Pawnee	SW ¼ SW ¼ NW ¼	1	T 22 S	R 17 E/W

Distance and direction from nearest town or city street address of well if located within city?
2 west, ½ south of Larned, Ks.

2 WATER WELL OWNER: Larned State Hospital
RR#, St. Address, Box # : Rt.3 Box 89
City, State, ZIP Code : Larned, ks. 67550

Board of Agriculture, Division of Water Resources
Application Number: #20010108

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



4 DEPTH OF COMPLETED WELL 40 ft. ELEVATION:
Depth(s) Groundwater Encountered 1. ____ ft. 2. ____ ft. 3. ____ ft.
WELL'S STATIC WATER LEVEL 38 ft. below land surface measured on mo/day/yr 6-7-01
Pump test data: Well water was ____ ft. after ____ hours pumping ____ gpm
Est. Yield NA gpm: Well water was ____ ft. after ____ hours pumping ____ gpm
Bore Hole Diameter 13½ in. to 40 ft., and ____ in. to ____ ft.
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 X ; If yes, mo/day/yrs sample was submitted
Water Well Disinfected? Yes ____ No X

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped ____
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded ____
2 PVC 4 ABS 7 Fiberglass Threaded ____
Blank casing diameter 8 in. to 18 ft., Dia ____ in. to ____ ft., Dia ____ in. to ____ ft.
Casing height above land surface 2' in., weight SDR-26 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) ____ ft.
SCREEN-PERFORATED INTERVALS: From 40 ft. to 18 ft., From ____ ft. to ____ ft.
From ____ ft. to ____ ft., From ____ ft. to ____ ft.
GRAVEL PACK INTERVALS: From 40 ft. to 17 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 hole plug
Grout Intervals: From 17 ft. to 0 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? north How many feet? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top soil			
3	13	Brown clay			
13	19	Brown and gray clay			
19	23	Sandy, blue gray clay			
23	38	Sand & gravel blueish gray, medium, loose, clay streaks			
38	40	Tan clay			

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) 6-7-01 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. 134 This Water Well Record was completed on (mo/day/yr) 6-21-01
under the business name of Rosencrantz-Bemis by (signature) Fredia Bledsoe

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.