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

1 LOCATION OF WATER WELL:

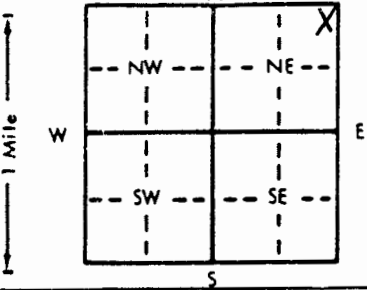|	Fraction	Section Number	Township Number	Range Number
County: Reno	NE ¼ NE ¼ NE ¼	17	T 23 S	R 5 E/(W)

Distance and direction from nearest town or city street address of well if located within city?

235' South of the SW corner of E. 4th St. & Halstead St

2 WATER WELL OWNER:

RR#, St. Address, Box # : Hamilton Roofing
301 N. Halstead
City, State, ZIP Code : Hutchinson, Kansas

Board of Agriculture, Division of Water Resources
Application Number:

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

```
        N
   |    |    X
-- NW --|-- NE --
   |    |
 W |    |         E
-- SW --|-- SE --
   |    |
        S
```
(1 Mile on both sides)

4 DEPTH OF COMPLETED WELL......20.......ft. ELEVATION: ....

Depth(s) Groundwater Encountered 1.........15......ft. 2.............ft. 3...............ft.

WELL'S STATIC WATER LEVEL ...16.62... ft. below land surface measured on mo/day/yr ....

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 ..7.5/8...in. to ...20....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 Lawn and garden only   (10) Monitoring well ....

Was a chemical/bacteriological sample submitted to Department? Yes...........No.....X....; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes   No   X

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.....X......

Blank casing diameter .....2......in. to ...10....ft., Dia ....in. to.......ft., Dia ....in. to.......ft.

Casing height above land surface...........0.......in., weight ....lbs./ft. Wall thickness or gauge No. ..sch 40.........

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) ....

SCREEN-PERFORATED INTERVALS: From.........10.....ft. to ....20....ft., From ....ft. to.......ft.
From ....ft. to ....ft., From ....ft. to.......ft.

GRAVEL PACK INTERVALS: From.........8.....ft. to ....20....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....0.......ft. to .....6.....ft., From....6.....ft. to.....8.....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 14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	(11) Fuel storage 15 Oil well/Gas well
3 Watertight sewer lines 6 Seepage pit		9 Feedyard	12 Fertilizer storage 16 Other (specify below)
			13 Insecticide storage

Direction from well? East   How many feet? 170

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Roadgrvl & f-c snd, prly srtd, damp, v slty sl v drk cly			
1	4	Cly, v drk brn, v slty, sl-mod f-c snd & grvl, damp			
4	9	Cly, med oran-brn, v slty, tr v f-f snd, v plstc, moist			
9	12	Cly, med brn, v slty, v plstc, moist			
12	16	Cly, v drk gry, v plstc, v slty			
16	20	Snd, f-c grnd, v grvly, prly srtd, v drk gry, sl cly			
					MW3 - Flushmount
					Don Taylor

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was ompleted on (mo/day/year) ....10-20-94.......... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ....527....... This Water Well Record was completed on (mo/day/yr) ....10-24-94.......... nder the business name of GeoCore Services, Inc.   by (signature) _____