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

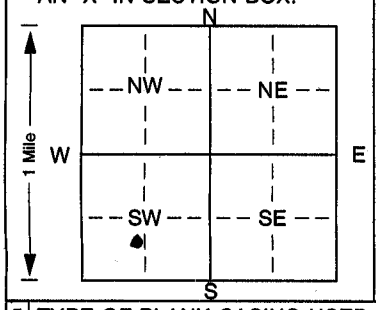
1 LOCATION OF WATER WELL: County: Stafford	Fraction: NE ¼ SW ¼ SW ¼	Section Number: 13	Township Number: T 24 S	Range Number: R 12 ~~E~~/W

Distance and direction from nearest town or city street address of well if located within city?
505 S. Buckeye or 125' S + 76' W of Cof I Buckeye + Grand

2 WATER WELL OWNER: Stafford District Hospital
RR#, St. Address, Box # : 502 S Buckeye
City, State, ZIP Code : Stafford, KS 67578

Board of Agriculture, Division of Water Resources Application Number: N/A

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



4 DEPTH OF COMPLETED WELL 46' ft. ELEVATION:
Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.
WELL'S STATIC WATER LEVEL 10.18 ft. below land surface measured on mo/day/yr 04-01-02
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 N/A in. to 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 ; 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
(Steel) 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
2 PVC 4 ABS 7 Fiberglass Threaded X
Blank casing diameter 1.250 in. to 46' ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface -6.5' 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) Sand point
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 N/A ft. to ft., From ft. to ft.
From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From N/A 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 ft. to 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
			5.5'	46'	Bentonite Chips
			0	5.5	Topsoil

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) 04-01-02 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. N/A This Water Well Record was completed on (mo/day/yr) 04-02-02 under the business name of Stafford District Hospital by (signature) Verna Minnie

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.