

WATER WELL RECORD

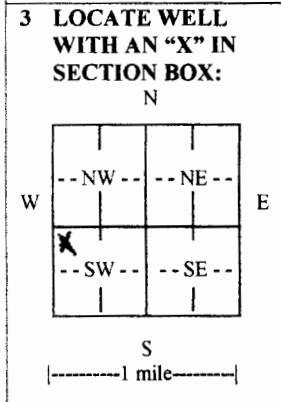
Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Stafford Fraction 1/4 NW 1/4 NW 1/4 SW 1/4 Section Number 2 Township No. T 25 S Range Number R 13 [ ] E [x] W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here [ ] 6 South, 1 East of St John Global Positioning System (GPS) information: Latitude: 37.904885 Longitude: 98.728413

2 WATER WELL OWNER: Reggie Fisher RR#, Street Address, Box #: 110 North Exchange City, State, ZIP Code : St John, KS 67576 Collection Method: [x] GPS unit [ ] Digital Map/Photo [ ] Topographic Map [ ] Land Survey



3 LOCATE WELL WITH AN 'X' IN SECTION BOX: 4 DEPTH OF COMPLETED WELL 100 ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL 25 ft. below land surface measured on mo/day/yr. 6-13-16

5 TYPE OF CASING USED: [ ] Steel [x] PVC [ ] Other CASING JOINTS: [x] Glued [ ] Clamped [ ] Welded [ ] Threaded Casing diameter 5 in. to 100 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.

TYPE OF SCREEN OR PERFORATION MATERIAL: [ ] Steel [ ] Stainless Steel [x] PVC [ ] Other (Specify) [ ] Brass [ ] Galvanized Steel [ ] None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: [ ] Continuous slot [ ] Mill slot [ ] Gauze wrapped [ ] Torch cut [ ] Drilled holes [ ] None (open hole)

6 GROUT MATERIAL: [ ] Neat cement [ ] Cement grout [x] Bentonite [ ] Other Grout Intervals: From ..... ft. to ..... ft., From 20 ft. to 0 ft., From ..... ft. to ..... ft. What is the nearest source of possible contamination: [ ] Septic tank [ ] Lateral lines [ ] Pit privy [ ] Livestock pens [ ] Insecticide storage [x] Other (specify below)

Table with columns FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS. Rows include Sandy top soil, Grav & sandy brown clay, Brown clay w/soft sand & brown clay, Sand & gravel- small med coarse & clean, Tan clay w/ sandy clay, Sand & gravel- small med, Sandy tan clay.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was [x] constructed, [ ] reconstructed, or [ ] plugged under my jurisdiction and was completed on (mo/day/year) 6-13-16 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/year) 6-15-16 under the business name of Rosencrantz- Bemis Ent Inc by (signature) Nora Ales

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html