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

1 LOCATION OF WATER WELL

County:	Fraction	Section Number	Township Number	Range Number
Sedgwick	SW ¼ NW ¼ NW ¼	2	T 25 S	R 3 E (W)

Distance and direction from nearest town or city? 2E. 2 3/4 N. Mt. Hope

Street address of well if located within city?

2 WATER WELL OWNER: McCurry Bros.
RR#, St. Address, Box # : Mt. Hope, Ks. 67108
City, State, ZIP Code :

Board of Agriculture, Division of Water Resources Application Number: 32731

3 DEPTH OF COMPLETED WELL 52 ft. Bore Hole Diameter 30 in. to 52 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 12 ft. below land surface measured on July 1 month ..... day 1980 year

Pump Test Data Did not : Well water was ..... ft. after ..... hours pumping ..... gpm
Est. Yield 900 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

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

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

Blank casing dia 16 in. to 26 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 12 in., weight ..... lbs./ft. Wall thickness or gauge No 3/4"

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

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

Screen-Perforation Dia 16 in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in to ..... ft.

Screen-Perforated Intervals: From 26 ft. to 52 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

Gravel Pack Intervals: From 10 ft. to 52 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 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well
2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well
3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 13 Watertight sewer lines 16 Other (specify below) None

Direction from well ..... How many feet ..... ? 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 ..... No X

If Yes: Pump Manufacturer's name ..... Model No. ..... HP ..... Volts .....

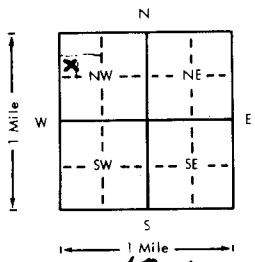
Depth of Pump Intake ..... ft. Pumps Capacity rated at ..... gal./min.

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 July month 2 day 1980 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 238

This Water Well Record was completed on Feb. month 10 day 1981 year under the business name of Weninger Irrigation by (signature) Kathleen Weninger

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



ELEVATION: 1350

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Topsoil			
2	6	Fine Sand			
6	14	Sand/Clay			
14	26	Gray Clay			
26	52	Med-Coarse Sand			
52	60	Clay			

Depth(s) Groundwater Encountered 1 26 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 25 R 3 E (W) SEC. 2 SW ¼ NW ¼ NW ¼