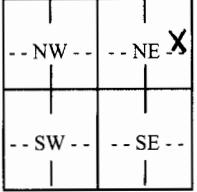


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Kearny</u>	Fraction <u>SE 1/4 NE 1/4 NE 1/4</u>	Section Number <u>4</u>	Township Number <u>T 25 S</u>	Range Number <u>R 35 E(W)</u>
Distance and direction from nearest town or city street address of well if located within city?		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: <u>Larry Goree</u> RR#, St. Address, Box # : <u>1249 Road 4</u> City, State, ZIP Code : <u>Lakin KS 67860</u>				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  W E S	4 DEPTH OF COMPLETED WELL <u>315</u> ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL... <u>16.7</u> ft. below land surface measured on mo/day/yr. <u>8-19-08</u> . Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield. <u>50</u> ...gpm: Well water was.....ft. after..... hours pumping..... gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/>; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> No
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5 TYPE OF 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.....
Blank casing diameter 10 in. to 315 ft., Diameter in. to ft., Diameter in. to ft.
Casing height above land surface..... 12 in., Weight lbs./ft. Wall thickness or gauge No. 200 psi.....
TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel 3 Stainless Steel 5 Fiberglass PVC 9 ABS 11 Other (Specify)
2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)
2 Louvered shutter 4 Key punched 6 Wire wrapped Saw Cut 10 Other (specify)
SCREEN-PERFORATED INTERVALS: From..... 275 ft. to 315 ft., From ft. to ft.
From..... ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From..... 25 ft. to 185 ft., From ft. to ft.
From..... 195 ft. to 315 ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other
Grout Intervals: From 5 ft. to 25 ft., From 185 ft. to 195 ft., From ft. to ft.
What is the nearest source of possible contamination:
 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well
Direction from well? How many feet? ...100.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	top soil	230	258	brown clay, coarse sand streaks
2	72	brown clay	258	282	med. to coarse sand, small gravel
72	75	coarse sand, small gravel			few brown clay streaks
75	97	brown clay	282	291	brown clay, clay streaks
97	120	blue clay	291	302	coarse sand, loose
120	156	blue clay, coarse sand streaks	302	312	brown clay, coarse sand streaks
156	181	med. to coarse sand, small gravel	312	322	yellow shale
181	196	blue clay	322		black shale
196	216	brown clay, coarse sand streaks			
216	230	coarse sand, brown clay mixed			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) ... 8-19-08 ... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 532 ... This Water Well Record was completed on (mo/day/year) 9-24-08 under the business name of Midwest Well & Pump Inc by (signature) John Sautup

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.