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

1 LOCATION OF WATER WELL | Fraction | Section Number | Township Number | Range Number

County: KEARNEY | NE ¼ SE ¼ SW ¼ | 30 | T 25 S | R 38 E/W

Distance and direction from nearest town or city? 6 S 3/4 E Kendall, Kansas | Street address of well if located within city?

2 WATER WELL OWNER: Herb Klaason

RR#, St. Address, Box # : Rt. 3

City, State, ZIP Code : Kendall, Kansas

Board of Agriculture, Division of Water Resources Application Number:

3 DEPTH OF COMPLETED WELL 250 ft. Bore Hole Diameter 10 in. to 250 ft., and ..... in. to ..... ft.

Well Water to be used as: 5 Public water supply 8 Air conditioning 11 Injection well

XX 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 Observation well .....

Well's static water level 90 ft. below land surface measured on ..... month ..... day ..... year

Pump Test Data: Well water was ..... ft. after ..... hours pumping ..... gpm

Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 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 .....

XX 2 PVC 4 ABS 7 Fiberglass ..... Threaded .....

Blank casing dia 5 in. to 210 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 10-24 in., weight 250 PSI lbs./ft. Wall thickness or gauge No .325

TYPE OF SCREEN OR PERFORATION MATERIAL: XX 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 XX 3 Mill slot 6 Wire wrapped 9 Drilled holes

2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....

Screen-Perforation Dia 5 in. to 250 ft., Dia ..... in. to ..... ft., Dia ..... in to ..... ft.

Screen-Perforated Intervals: From 210 ft. to 250 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

Gravel Pack Intervals: From 150 ft. to 250 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

5 GROUT MATERIAL: XX 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: None

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 16 Other (specify below)

13 Watertight sewer lines .....

Direction from well ..... How many feet ..... ? Water Well Disinfected? Yes XX No .....

Was a chemical/bacteriological sample submitted to Department? Yes ..... No XX ..... If yes, date sample was submitted ..... month ..... day ..... year: Pump Installed? Yes ..... No Windmill

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

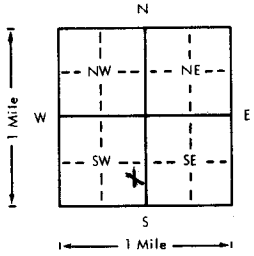
Depth of Pump Intake ..... ft. Pumps Capacity rated at ..... gal./min.

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 3 month 22 day 1981 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 160

This Water Well Record was completed on 7 month 2 day 81 year under the business name of JIM SMITH PUMP SERVICE by (signature) Betty Pearce BK Betty Pearce

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



ELEVATION:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	60	Sand (fine to Med.)			
60	230	Shale			
230	250	Sandstone			

Depth(s) Groundwater Encountered 1 ..... 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 38 E/W SEC. 30 NE ¼ SE ¼ SW ¼