

Form WWC-5

1 LOCATION OF WATER WELL:	Fraction County: <u>Gray</u> <u>SE 1/4 NE 1/4 NW 1/4</u>	Section Number 10	Township Number T 26 S	Range Number R 28 E										
Distance and direction from nearest town or city street address of well if located within city? <u>402 W Ave A</u>														
2 WATER WELL OWNER:	Jake Osborn Lebo Service, Inc. Attn: Jake Osborne P.O. Box 492 Cimarron, KS 67835													
RR#, St. Address, Box #	Board of Agriculture, Division of Water Resources Application Number:													
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:														
<table border="1" style="width: 100px; height: 100px; border-collapse: collapse;"> <tr><td colspan="2" style="text-align: center;">N</td></tr> <tr><td style="text-align: center;">W</td><td style="text-align: center;">E</td></tr> <tr><td style="text-align: center;">S</td><td style="text-align: center;">S</td></tr> <tr><td style="text-align: center;">NW</td><td style="text-align: center;">NE</td></tr> <tr><td style="text-align: center;">SW</td><td style="text-align: center;">SE</td></tr> </table>					N		W	E	S	S	NW	NE	SW	SE
N														
W	E													
S	S													
NW	NE													
SW	SE													
4 DEPTH OF COMPLETED WELL <u>60</u> ft. ELEVATION: <u>~45</u>														
Depth(s) Groundwater Encountered 1 <u>~45</u> ft. 2 ft. 3 ft.														
WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr														
Pump test data: Well water was ft. after hours pumping gpm														
Est. Yield 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 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 X If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No (No)														
5 TYPE OF BLANK CASING USED:	5 Wrought iron 1 Steel 2 PVC	6 Asbestos-Cement 3 RMP (SR) 4 ABS	7 Fiberglass 8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued Clamped Welded Threaded X										
Blank casing diameter	2	in. to	100 ft., Dia	in. to ft., Dia in. to ft.										
Casing height above land surface	3	in., weight	0.8	lbs./ft. Wall thickness or guage No <u>Set 40 PVC</u>										
TYPE OF SCREEN OR PERFORATION MATERIAL:														
1 Steel 2 Brass	3 Stainless Steel 4 Galvanized Steel	5 Fiberglass 6 Concrete tile	7 PVC 8 RMP (SR) 9 ABS	10 Asbestos-Cement 11 Other (Specify) 12 None used (open hole)										
SCREEN OR PERFORATION OPENINGS ARE:														
1 Continuous slot 2 Louvered shutter	3 Mill slot 4 Key punched	5 Guazed wrapped 6 Wire wrapped 7 Torch cut	8 Saw cut 9 Drilled holes 10 Other (specify)	11 None (open hole) ft.										
SCREEN-PERFORATED INTERVALS: From 30 ft. to 60 ft., From ft. to ft.														
From ft. to ft., From ft. to ft.														
GRAVEL PACK INTERVALS: From 28 ft. to 60 ft., From ft. to ft.														
From ft. to ft., From ft. to ft.														
6 GROUT MATERIAL:	1 Neat cement Grout Intervals: From 1 ft. to 28 ft.	2 Cement grout ft., From ft. to ft.	3 Bentonite ft., From ft. to ft.	4 Other ft. to ft.										
What is the nearest source of possible contamination:														
1 Septic tank 2 Sewer lines 3 Watertight sewer lines	4 Lateral lines 5 Cess pool 6 Seepage pit	7 Pit privy 8 Sewage lagoon 9 Feedyard	10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage	14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) <u>Last Site</u>										
Direction from well? How many feet?														
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS									
0	0.5	Concrete												
0.5	1	Clay, moist												
1	8	Silty clay, dry												
8	23	Clay, moist												
23	34	Sandy clay, moist, very fine to fine grained												
34	35	Gravelly sand, fine to gravel, dry												
35	60													
					MWII									
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) <u>31/24/05</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No <u>594</u>				and this record is true to the best of my knowledge and belief. Kansas Water Well Record was completed on (mo/day/yr) <u>5/19/05</u> by (signature) <u>1/15/05</u>									
under the business name of <u>Concord Contracting</u>														

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) 31/24/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 894 This Water Well Record was completed on (mo/day/yr) 5/19/05

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.