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

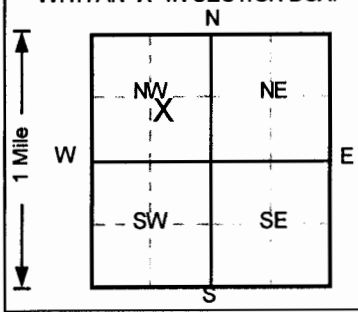
1 LOCATION OF WATER WELL: County: Pratt	Fraction: NW ¼ SE ¼ NW ¼	Section Number: 25	Township Number: T 27 S	Range Number: R 11 E/W

Distance and direction from nearest town or city street address of well if located within city?
2 miles W, 2 miles N, 1 mile W of Cunningham

2 WATER WELL OWNER: Northern Natural Gas Company
RR#, St. Address, Box # : P.O. Box 178
City, State, ZIP Code : Cunningham, Kansas 67035

Board of Agriculture, Division of Water Resources
Application Number:

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



4 DEPTH OF COMPLETED WELL ..... 10 ..... ft. ELEVATION: ..... 102.39 .....
Depth(s) Groundwater Encountered 1. ..... ft. 2. ..... ft. 3. ..... ft.
WELL'S STATIC WATER LEVEL .... 6.2 .... ft. below land surface measured on mo/day/yr .... 7/28/95 .....
Pump test data: Well water was .... NA .... ft. after ..... hours pumping ..... gpm
Est. Yield .. NA ... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm
Bore Hole Diameter .... 5 .... in. to ..... 10 ..... ft., and ..... in. to ..... ft.
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 Lawn and garden only (10) Monitoring well .....
Was a chemical/bacteriological sample submitted to Department? Yes.....No ✓.....; If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes No ✓

5 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 .....
(2) PVC 4 ABS 7 Fiberglass ..... Threaded ✓.....
Blank casing diameter ..... 2 ..... in. to ..... 5 ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.
Casing height above land surface ..... 35.28 ..... in., weight ..... lbs./ft. Wall thickness or gauge No. .... Sch. 40 .....
TYPE OF SCREEN OR PERFORATION MATERIAL (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 (3) Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....
SCREEN-PERFORATED INTERVALS: From ..... 5 ..... ft. to ..... 10 ..... ft., From ..... ft. to ..... ft
From ..... ft. to ..... ft., From ..... ft. to ..... ft
GRAVEL PACK INTERVALS: From ..... 4 ..... ft. to ..... 10 ..... ft., From ..... ft. to ..... ft
From ..... ft. to ..... ft., From ..... ft. to ..... ft

6 GROUT MATERIAL: 1 Neat cement (2) Cement grout (3) Bentonite 4 Other .....
Grout Intervals: From ..... 0 ..... ft. to ..... 2 ..... ft., From ..... 2 ..... ft. to ..... 4 ..... ft., From ..... ft. to ..... ft
What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage (16) Other (specify below)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage ... Brine pipeline .....
Direction from well? SE How many feet? 180

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Clay, Brown-Gray-Red			
3	7	Clay, Brown-Gray-Red			
7	10	Clay, Dark Gray			
					MW12 , Tag # 144054 , Above Ground Cover
					Project Name: NNG-Cunningham
					GeoCore # 213 , #

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) ..... 7/27/95 ..... and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. ..... 527 ..... This Water Well Record was completed on (mo/day/yr) ..... 8/30/95 .....
under the business name of GeoCore Services, Inc. by (signature) [signature]

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T R E/W SEC. ¼ ¼ ¼