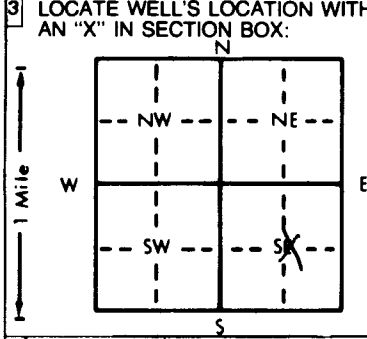


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:
 County: Kiowa Fraction: N 1/4 N/C 1/4 SE 1/4 Section Number: 32 Township Number: T 27 S Range Number: R 20 NE/W
 Distance and direction from nearest town or city street address of well if located within city?
3 1/2 north, 2 1/4 west of Mullinville, Ks.

2 WATER WELL OWNER: Pat Janssen
 RR#, St. Address, Box #: 411 S. Pine Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Greensburg, Ks. 67054 Application Number: 16,842



4 DEPTH OF COMPLETED WELL: 110 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 67 ft. below land surface measured on mo/day/yr 6-25-98
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: 1000 gpm: Well water was 81 ft. after 4 hours pumping 1000 gpm
 Bore Hole Diameter: 28 in. to 110 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 X _____; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes _____ No X _____

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter: 16 in. to 80 ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight _____ SDR: 32.5 lbs./ft. Wall thickness or gauge No. _____
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) 11 Other (specify) _____
 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 ~~Louvered shutter~~ 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
SCREEN-PERFORATED INTERVALS: From 80 ft. to 110 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 110 ft. to 20 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 20 ft. to 0 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____
 13 Insecticide storage _____

Direction from well? north west How many feet? 22'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top soil			
3	14	Fine sand			
14	98	Sand and gravel- coarse			
98	110	Brown clay			

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) 6-26-98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/yr) 7-1-98 under the business name of Rosencrantz-Bemis by (signature) India Redson

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.

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