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

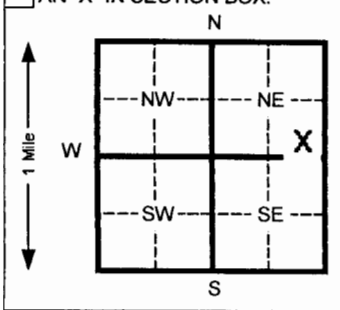
1 LOCATION OF WATER WELL: County: **Grant** | Fraction: **SE ¼ SE ¼ NE ¼** | Section Number: **18** | Township Number: T **27** S | Range Number: R **35** E/W

Distance and direction from nearest town or city street address of well if located within city?
7 North, 9 East, 1 North, 1East & ½ North Of 4 Way in Ulysses Ks

2 WATER WELL OWNER: **Larry Smith**
RR#, St. Address, Box # : **9170 E Rd 2**
City, State, ZIP Code : **Ulysses Ks 67880**

Board of Agriculture, Division of Water Resources
Application Number: **22269**

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



4 DEPTH OF COMPLETED WELL **555** ft. ELEVATION: **3091**
Depth(s) Groundwater Encountered 1 **260** ft. 2 ____ ft. 3 ____ ft.
WELL'S STATIC WATER LEVEL **260** ft. below land surface measured on mo/day/yr **3/01/06**
Pump test data: Well water was ____ ft. after ____ hours pumping ____ gpm
Est. Yield ____ gpm: Well water was ____ ft. after ____ hours pumping ____ gpm
Bore Hole Diameter **26** in. to **555** ft. and ____ in. to ____ ft.
WELL WATER TO BE USED AS: 1 Domestic 2 Irrigation 3 Feed lot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Lawn and garden (domestic) 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well 12 Other (Specify below)
Was a chemical/bacteriological sample submitted to Department? Yes ____ No **X** If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes **X** No

5 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought Iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)
CASING JOINTS: Glued ____ Clamped ____ Welded **X** Threaded ____
Blank casing diameter **16** in. to **555** ft., Dia ____ in. to ____ ft., Dia ____ in. to ____ ft.
Casing height above land surface **12** in., weight ____ lbs./ft. Wall thickness or gauge No. **.250**

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 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)

SCREEN-PERFORATED INTERVALS: From **315** ft. to **415** ft. From **495** ft. to **555** ft.
From ____ ft. to ____ ft. From ____ ft. to ____ ft.
GRAVEL PACK INTERVALS: From **20** ft. to **555** 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 **20** ft. From ____ ft. to ____ ft. From ____ 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)
Direction from well? **South** How many feet? **290**

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	48		Top soil & br sandy clay	468	481	Yellow clay & 35% sandstone
48	62		Fine sand	481	487	shale
62	103		Br sandy clay	487	541	Shale & 25 % sandstone
103	107		Fine sand	541	555	shale
107	249		Fine to med sand & gravel			
249	255		Br sandy clay			
255	260		Fine to med sand			
260	269		Br sandy clay			
269	317		Fine to med sand & gravel			
317	320		Br sandy clay			
320	387		Fine to med sand & gravel			
387	390		White clay			
390	396		Fine to med sand & gravel			
396	468		Br sandy 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/yr) **3/01/06** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **473** This Water Well Record was completed on (mo/day/yr) ____
under the business name of **Tyler Water Well Inc.** by (signature) Dustin Tyler

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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.