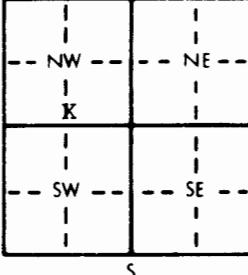


## WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:		Fraction 1/4	Center south side 1/4 NW 1/4	Section Number 10	Township Number T 28 S	Range Number R 30 E/W		
Distance and direction from nearest town or city street address of well if located within city? Approximately 6 miles north & 2 miles east of Copeland, Ks.								
2 WATER WELL OWNER:		Bernie Frigon P. O. Box 1695		Board of Agriculture, Division of Water Resources Application Number: 9,767				
City, State, ZIP Code:		Dodge City, Ks. 67801						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL .190 ft. ELEVATION: . . . . . Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL .165 ft. below land surface measured on mo/day/yr .4-12-90. 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 . . . . . in. to . . . . . ft., and . . . . . in. to . . . . . ft. WELL WATER 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 <input checked="" type="checkbox"/> No <input type="checkbox"/>						
5 TYPE OF BLANK CASING USED:		5 Wrought iron 1 Steel 2 PVC	6 Asbestos-Cement 3 RMP (SR) 4 ABS	7 PVC 8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued . . . . . Clamped . . . . . Welded . . . . . Threaded . . . . .			
Blank casing diameter . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.								
Casing height above land surface . . . . . ft. below . . . . . weight . . . . . lbs./ft. Wall thickness or gauge No. . . . .								
TYPE OF SCREEN OR PERFORATION MATERIAL:		5 Fiberglass 1 Steel 2 Brass	6 Concrete tile 3 Stainless steel 4 Galvanized steel	7 PVC 8 RMP (SR) 9 ABS	10 Asbestos-cement 11 Other (specify) . . . . . 12 None used (open hole) . . . . .			
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped 1 Continuous slot 2 Louvered shutter	6 Wire wrapped 3 Mill slot 4 Key punched	7 Torch cut	8 Saw cut 9 Drilled holes 10 Other (specify) . . . . .			
SCREEN-PERFORATED INTERVALS: From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.								
From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.								
GRAVEL PACK INTERVALS: From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.								
From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.								
6 GROUT MATERIAL:		1 Neat cement Grout Intervals: From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.	2 Cement grout 3 Bentonite	4 Other				
What is the nearest source of possible contamination:		7 Pit privy 2 Sewer lines 3 Watertight sewer lines	8 Sewage lagoon 5 Cess pool 6 Seepage pit	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) . . . . . Irrigation well . . . . .		
Direction from well? East		How many feet? 100						
FROM		TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS	
					165	190	Sand	
					6	165	Clay material	
					3	6	Cement grout	
					0	3	Backfill	
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) . . . . . 4-12-90 . . . . . and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . . . 145 . . . . . This Water Well Record was completed on (mo/day/yr) . . . . . 4-18-90 . . . . .					by (signature) <i>Bernie Frigon</i>	
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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.								