WATER WELL RECORD — Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL: County: Gray | Fraction: NE¼ NW¼ NW¼ | Section Number: 22 | 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? From Copeland, 1½ miles east, 3¼ miles north the 1/4 east.

Global Positioning Systems (decimal degrees, min. of 4 digits)
Latitude: _____
Longitude: _____
Elevation: _____
Datum: _____
Data Collection Method: _____

2 WATER WELL OWNER: Sherrill Esau
RR#, St. Address, Box # : 300 East Park
City, State, ZIP Code : Montezuma, KS. 67867

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

N / W / E / S — X in NW

4 DEPTH OF COMPLETED WELL 405 ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL 205 ft. below land surface measured on mo/day/yr 11/22/05
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/yrs Sample was submitted..... Water well disinfected? Yes X No .....

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued X Clamped.....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded.....
(2) PVC 4 ABS 7 Fiberglass ..... Threaded.....

Blank casing diameter 5 in. to ..... ft., Diameter. ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface 12 in., Weight.....lbs./ft. Wall thickness or guage No. SDR21

TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel 3 Stainless Steel 5 Fiberglass (7) PVC 9 ABS 11 Other (Specify) .....
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
1 Continuous slot 3 Mill slot 5 Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)
2 Louvered shutter 4 Key punched 6 Wire wrapped (8) Saw Cut 10 Other (specify) .....

SCREEN-PERFORATED INTERVALS: From 365 ft. to 405 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 24 ft. to 280 ft., From 290 ft. to 405 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 4 ft. to 24 ft., From 280 ft. to 290 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 13 Insecticide Storage 16 Other (specify below)
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage (14) Abandoned water well
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well .....
Direction from well? West How many feet? 70

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Topsoil	179	203	Med-sand
2	15	Tan clay + fine sand	203	210	Tan clay + Caliche
15	30	Tan clay	210	236	Tan clay + sandrock
30	90	Tan clay + caliche	236	242	Med-sand
90	95	Tan clay + Tan sandy clay	242	247	Sandrock
95	134	Tan clay + caliche	247	279	Med-sand + Tan clay layers
134	150	Med-sand	279	345	Tan clay
150	165	Med-sand, Tan clay + sandrock	345	405	Med-Coarse sand + clay layers
165	174	Med-sand			
174	179	Tan 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) 11/22/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 533 This Water Well Record was completed on (mo/day/year) 1/9/07 under the business name of Janzen Water Well by (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, 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. Visit us at http://www.kdhe.state.ks.us/geo/waterwells.

KSA 82a-1212