

## WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.  

| <b>1 LOCATION OF WATER WELL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    | Fraction                                       |      | Section Number                                                       | Township Number    | Range Number                               |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| County: <b>Sedgwick</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |    | SW ¼                                           | NW ¼ | 6                                                                    | T 28s S            | R 4w E/W                                   |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>2950 S 40<sup>th</sup> St. W</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |    |                                                |      | <b>Global Positioning System</b> (decimal degrees, min. of 4 digits) |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>2 WATER WELL OWNER: Darrel Masterson</b><br>RR#, St. Address, Box # : 2950 S 40 <sup>th</sup> St. W<br>City, State, ZIP Code : Wichita KS 67235                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |    |                                                |      | Latitude: _____                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      | Longitude: _____                                                     |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      | Elevation: _____                                                     |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      | Datum: _____                                                         |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Data Collection Method: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |    | <b>4 DEPTH OF COMPLETED WELL</b> <u>60</u> ft. |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <div style="text-align: center;">             N<br/> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td></td><td>X</td><td></td></tr> <tr><td>NW</td><td></td><td>NE</td></tr> <tr><td>SW</td><td></td><td>SE</td></tr> </table>             S<br/>             W                      E           </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |    |                                                | X    |                                                                      | NW                 |                                            | NE   | SW |                | SE   | Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.<br>WELL'S STATIC WATER LEVEL <u>20</u> ft. below land surface measured on mo/day/yr<br>Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm<br>Est. Yield <u>20</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm<br>WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well<br>1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)<br><u>2</u> Irrigation 4 Industrial <u>7</u> Domestic (lawn & garden) 10 Monitoring well |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    | NW                                             |      | NE                                                                   |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    | SW                                             |      | SE                                                                   |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Sample was submitted _____ Water Well Disinfected? Yes <u>X</u> No _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <b>5 TYPE OF CASING USED:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |    | 3 RMP (SR)                                     |      | 6 Asbestos-Cement                                                    |                    | 9 Other (specify below)                    |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <u>2</u> PVC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    | 4 ABS                                          |      | 7 Fiberglass                                                         |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Blank casing diameter <u>5</u> in. to <u>60</u> ft., Dia                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Casing height above land surface <u>12</u> in., Weight <u>2.40</u> lbs./ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |    |                                                |      |                                                                      |                    | Wall thickness or gauge No. <u>160</u> psi |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>CASING JOINTS:</b> Glued <u>X</u> Clamped _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Welded _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Threaded _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |    | 3 Stainless steel                              |      | 5 Fiberglass                                                         |                    | <u>7</u> PVC                               |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 Brass                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |    | 4 Galvanized steel                             |      | 6 Concrete tile                                                      |                    | 8 RM (SR)                                  |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      |                                                                      |                    | 9 ABS                                      |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      |                                                                      |                    | 11 Other (specify) _____                   |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      |                                                                      |                    | 12 None used (open hole)                   |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>SCREEN OR PERFORATION OPENINGS ARE:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 Continuous slot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |    | <u>3</u> Mill slot                             |      | 5 Guaze wrapped                                                      |                    | 7 Torch cut                                |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 Louvered shutter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |    | 4 Key punched                                  |      | 6 Wire wrapped                                                       |                    | 8 Saw Cut                                  |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      |                                                                      |                    | 9 Drilled holes                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      |                                                                      |                    | 11 None (open hole)                        |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>SCREEN-PERFORATED INTERVALS:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| From <u>47</u> ft. to <u>60</u> ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | From _____ ft. to _____ ft.                    |      | From _____ ft. to _____ ft.                                          |                    | From _____ ft. to _____ ft.                |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |    | From _____ ft. to _____ ft.                    |      | From _____ ft. to _____ ft.                                          |                    | From _____ ft. to _____ ft.                |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>GRAVEL PACK INTERVALS:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| From <u>20</u> ft. to <u>60</u> ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | From _____ ft. to _____ ft.                    |      | From _____ ft. to _____ ft.                                          |                    | From _____ ft. to _____ ft.                |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |    | From _____ ft. to _____ ft.                    |      | From _____ ft. to _____ ft.                                          |                    | From _____ ft. to _____ ft.                |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>6 GROUT MATERIAL:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1 Neat cement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    | 2 Cement grout                                 |      | <u>3</u> Bentonite                                                   |                    | 4 Other _____                              |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Grout Intervals From <u>3</u> ft. to <u>20</u> ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |    | From _____ ft. to _____ 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                          |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 Sewer lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    | 5 Cess pool                                    |      | 8 Sewage lagoon                                                      |                    | 11 Fuel storage                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <u>3</u> Watertight sewer lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    | 6 Seepage pit                                  |      | 9 Feedyard                                                           |                    | 12 Fertilizer storage                      |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      |                                                                      |                    | 13 Insecticide Storage                     |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      |                                                                      |                    | 14 Abandoned water well                    |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      |                                                                      |                    | 15 Oil well/ gas well                      |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      |                                                                      |                    | 16 Other (specify below) _____             |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Direction from well? <u>East</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    |                                                |      | How many feet? <u>40</u>                                             |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>1</td> <td>Top soil</td> <td></td> <td></td> <td></td> </tr> <tr> <td>1</td> <td>8</td> <td>Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>8</td> <td>18</td> <td>Fine sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>18</td> <td>38</td> <td>Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>38</td> <td>44</td> <td>Fine sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>44</td> <td>51</td> <td>Med-Fine sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>51</td> <td>60</td> <td>Shale</td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> |    |                                                |      |                                                                      |                    |                                            | FROM | TO | LITHOLOGIC LOG | FROM | TO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | PLUGGING INTERVALS | 0 | 1 | Top soil |  |  |  | 1 | 8 | Clay |  |  |  | 8 | 18 | Fine sand |  |  |  | 18 | 38 | Clay |  |  |  | 38 | 44 | Fine sand |  |  |  | 44 | 51 | Med-Fine sand |  |  |  | 51 | 60 | Shale |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | TO | LITHOLOGIC LOG                                 | FROM | TO                                                                   | PLUGGING INTERVALS |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 1  | Top soil                                       |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 8  | Clay                                           |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 18 | Fine sand                                      |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 38 | Clay                                           |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 38                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 44 | Fine sand                                      |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 44                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 51 | Med-Fine sand                                  |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 51                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 60 | Shale                                          |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <u>(1)</u> constructed, <u>(2)</u> reconstructed, or <u>(3)</u> plugged under my jurisdiction and was completed on (mo/day/year) <u>5-23-08</u> and this record is true to the best of my knowledge and be Kansas Water Well Contractor's License No. <u>740</u> . This Water Well Record was completed on (mo/day/year) <u>6-1-08</u> under the business name of <u>Weninger Drilling Inc.</u> by (signature) _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>INSTRUCTIONS:</b> Please fill in blanks 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. Fe \$5.00 for each constructed well. Visit us at <a href="http://www.kdheks.gov/waterwell">http://www.kdheks.gov/waterwell</a> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    |                                                |      |                                                                      |                    |                                            |      |    |                |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |   |   |          |  |  |  |   |   |      |  |  |  |   |    |           |  |  |  |    |    |      |  |  |  |    |    |           |  |  |  |    |    |               |  |  |  |    |    |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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