WATER WELL RECORD	Form WWC-	-5	Division of Wate	r Resources; App. No.		
1 LOCATION OF WATER WELL:	Fraction		Section Number	Township Number	Range Number	
County: Smith	NW 1/4 SW 1/4	1/4	20	T 2 S	R 12 EW	
Distance and direction from nearest town or city street address of well if		ell if	Global Positioning Systems (decimal degrees, min. of 4 digits)			
located within city?N 4 miles & 1mile W of Bellaire			Latitude: 39°51'53" N Longitude: 98°41'42" W			
2 WATER WELL OWNER: Arden Devlin			71			
RR#, St. Address, Box # : 130 92 Rd			Datum:			
City, State, ZIP Code : Smith Center, KS 66967			Data Collection Method:			
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 135 ft.						
LOCATION COMPLETED WEEL STATEMENT OF COMPLETED WEIL STATEMENT OF COMPLETED WEEL STATEMENT OF COMPLETED WEIL STATEMENT OF COMPLETED WEIL STATEM						
WITH AN "X" IN Depth(s) Groundwater Encountered (1)90						
SECTION BOX: WELL'S STATIC WATER LEVEL90 ft. below land surface measured on mo/day/yr.8-28-07						
N Pump test data	fully too data.					
Est. Yieldgpm: Well water wasft. after hours pumpinggpm						
WELL WATER TO BE USED AS: 5 Public water supply  NWNWNENE  Domestic 3 Feedlot 6 Oil field water supply  WELL WATER TO BE USED AS: 5 Public water supply  Domestic 3 Feedlot 6 Oil field water supply  Domestic 3 Feedlot 6 Oil field water supply  Domestic 3 Feedlot 6 Oil field water supply  WELL WATER TO BE USED AS: 5 Public water supply  Domestic 3 Feedlot 6 Oil field water supply  WELL WATER TO BE USED AS: 5 Public water supply  Domestic 3 Feedlot 6 Oil field water supply  WELL WATER TO BE USED AS: 5 Public water su						
W A Latertial 7 Demostic (laws & condex) 10 Manifestina well						
SW SE  Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs						
Sample was submitted						
S						
5 TYPE OF CASING USED: 5 Wrought		rete tile	CASINO	G JOINTS: GluedX	Clamped	
		r (specify	below)			
2 PVC 4 ABS 7 Fiberglas				Threaded		
Blank casing diameter 16 in. to						
Casing height above land surface						
TYPE OF SCREEN OR PERFORATION MATERIAL:  1 Steel 3 Stainless Steel 5 Fiberglass 7 BVC 9 ABS 11 Other (Specify)						
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)						
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)						
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)						
SCREEN-PERFORATED INTERVALS: From						
From						
GRAVEL PACK INTERVALS:         From						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout (3)Bentonite 4 Other						
Grout Intervals: From ft. to	<b>45</b> ft., From		ft. to ft	., From	ft. toft.	
What is the nearest source of possible contamination:						
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)						
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well						
Direction from well?	•			i well/gas well		
FROM TO LITHOLOGIC		FROM		PLUGGING INTI		
0 20 Topsoil & Clay						
20 40 Clay						
40 60 Clay						
60 80 Clay						
80 100 10' Clay, 10' Clay	w/ Lime & Lime					
store strips	1					
100 120 7' Clay w/thing san		1)				
13' med to sourse s						
		1)				
2' Lime, 10' Grey slate   7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged						
under my jurisdiction and was completed on (mo/day/year)8-2707 and this record is true to the best of my knowledge and belief.						
Kansas Water Well Contractor's License No433 This Water Well Record was completed open day (year) 8480-07.						
under the business name of Chas Sargent Irrigation Company by (signature)						
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underling or write the correct answers. Send top						
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at						
http://www.kdheks.gov/waterwell/index.html.						