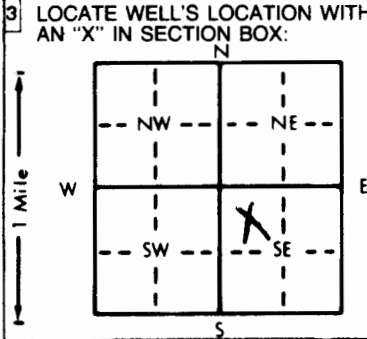


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: Barber	Fraction C 1/4 NW 1/4 SE 1/4	Section Number 33	Township Number T 30 S	Range Number R 11 E/W
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Distance and direction from nearest town or city street address of well if located within city?
5 1/8 miles south, 1 1/4 east of Isabel, Ks.

2 WATER WELL OWNER: Raymond Oil Co.
RR#, St. Address, Box # : PO Box 48788
City, State, ZIP Code : Wichita, Ks. 67201-8788
Board of Agriculture, Division of Water Resources
Application Number: 970381



4 DEPTH OF COMPLETED WELL: 115 ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL: 32 ft. below land surface measured on mo/day/yr 10-14-97.

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield: na gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter: .9 in. to 1.15 ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
1 Domestic	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	7 Lawn and garden only
		10 Monitoring well
		12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes _____ No _____

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded _____

Blank casing diameter: 5 in. to 4.7 ft., Dia 5 in. to 1.07-6.7 ft., Dia _____ in. to _____ ft.

Casing height above land surface: 2 in., weight SDR 26 lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	7 PVC	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)	11 Other (specify) _____
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From 47 ft. to 67 ft., From 107 ft. to 115 ft.

GRAVEL PACK INTERVALS: From 115 ft. to 20 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other hole plug

Grout Intervals: From 20 ft. to 0 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	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	none

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top soil	87	88	Hard white rock
3	6	Dark brown clay	88	94	Sandy brown clay & fine sand
6	17	Light brown & white clay	94	100	Gray & white clay
17	32	Sand and gravel, loose some clay	100	110	Rock, sand & brown clay mixed
32	33	brown clay	110	114	Sand and gravel
33	42	sand and gravel, loose fine to medium	114	115	Red bed
42	47	Brown clay			
47	56	Sand and gravel w/some clay			
56	59	Gray clay			
59	62	Redish brown clay			
62	67	Sand and gravel medium fine			
67	75	Brown & gray clay, tough			
75	82	Brown sandy clay			
82	84	Fine sand			
84	87	Blue, gray yeow brown clay			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 10-14-97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/yr) 10-23-97 under the business name of Rosencrantz-Bemis by (signature) Freda Hedson

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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