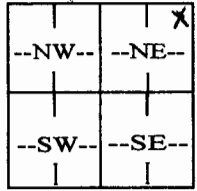


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

I LOCATION OF WATER WELL: County: Comanche	Fraction NE $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 36	Township Number T 31 S	Range Number R 19 E/W
Distance and direction from nearest town or city street address of well if located within city? 2 miles north of Hwy 160 and on the west side of Hwy 183		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: Bruce Freund RR#, St. Address, Box # 400 N. New York City, State, ZIP Code Coldwater, KS 67029				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  W E S	4 DEPTH OF COMPLETED WELL 275 ft. Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr _____ Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well I Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn& garden) 10 Monitoring well Test Hole Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr _____ Sample was submitted _____ Water well disinfected? Yes _____ No <input checked="" type="checkbox"/>
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5 TYPE OF CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued _____ Clamped _____
2 PVC	4 ABS	7 Fiberglass		Welded _____
Blank casing diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.				Threaded _____
Casing height above land surface _____ in., Weight _____ lbs./ft. Wall thickness or guage No. _____				

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	7 PVC	9 ABS	11 Other (Specify) _____
2 Brass	4 Galvanized Steel	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 _____ ft. to _____ ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.

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

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

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	13 Insecticide Storage	16 Other (specify below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer Storage	15 Oil well/gas well	

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	15	Silty sand	190	205	Sugar Sand/Tan Clay
15	20	Sand/Gray Clay	205	250	Small Gravel/Gyp
20	30	Sand	250	270	Small to medium gravel/Gyp
30	65	Medium Gravel/Sand	270	275	Gray Shale/Red Shale
65	90	Small Gravel/Sand/Gray Clay			
90	100	Sand/White Clay			
100	140	Small to Medium Gravel			
140	150	Medium Gravel/Gray Clay			
150	175	Small to Medium Gravel			
175	190	Small Gravel/Gyp/Gray 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) 6/23/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mo/day/year) 6/24/08 under the business name of Pratt Well Service, Inc. by (signature) *Pratt Well Service*

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1 000 SW Jackson St., Suite 420, Topeka, Kansas 66612- 1 367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdhe.state.ks.us/geo/waterwells>.