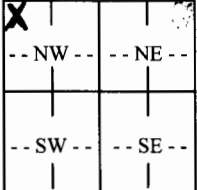


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Seward</u>	Fraction <u>NW 1/4 NW 1/4 NW 1/4</u>	Section Number <u>20</u>	Township Number <u>T 31 S</u>	Range Number <u>R 31 E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>Liberal: N on Hwy 83 to Hwy 160 E 8 S on Hwy 160 4.9 N and E into</u>		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: <u>SW Windmill</u> RR#, St. Address, Box # : <u>P.O. Box 909</u> City, State, ZIP Code : <u>Meade, KS 67864</u>		<i>Casper Jacobs</i>		

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  W E S	4 DEPTH OF COMPLETED WELL <u>480</u> ft. Depth(s) Groundwater Encountered (1)... <u>323</u> ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL... <u>323</u> ft. below land surface measured on mo/day/yr... <u>8-20-09</u> 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 <input checked="" type="checkbox"/> Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/>; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> No
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5 TYPE OF CASING USED: <input checked="" type="radio"/> Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) <input checked="" type="radio"/> PVC 4 ABS 7 Fiberglass	5 Wrought Iron 8 Concrete tile Blank casing diameter <u>.56</u> in. to <u>380</u> ft., Diameter..... in. to ft., Diameter..... in. toft. Casing height above land surface... <u>24</u> in., Weight <u>4.074</u> lbs./ft. Wall thickness or guage No. <u>SDR-21.316</u>	CASING JOINTS: <input checked="" type="checkbox"/> Glued..... <input type="checkbox"/> Clamped..... <input type="checkbox"/> Welded..... <input type="checkbox"/> Threaded.....
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <input checked="" type="radio"/> 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 <input checked="" type="radio"/> Saw cut 10 Other (specify)		
SCREEN-PERFORATED INTERVALS: From..... <u>380</u> ft. to <u>480</u> ft., From..... ft. to ft. From..... ft. to ft., From..... ft. to ft. GRAVEL PACK INTERVALS: From..... <u>280</u> ft. to <u>480</u> ft., From..... ft. to ft. From..... ft. to ft., From..... ft. to ft.		

6 GROUT MATERIAL: Neat cement 2 Cement grout 3 Bentonite Other hole plug.....
Grout Intervals: From 1 ft. to 25 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	1	Surface	374	381	Sand
1	27	Clay	381	387	Clay
27	104	Sandy Clay	387	397	Sand
104	141	Sand	397	412	Clay
141	143	Clay	412	432	Sand
143	198	Sand	432	474	Clay
198	276	Clay	474	480	Clay Joint
276	307	Sandy Clay			
307	360	Sand			
360	374	Clay			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 8-20-09, and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. KWCCCL430. This Water Well Record was completed on (mo/day/year) 8-20-09 under the business name of Howard Drilling Box 806 Beaver, Ok (signature) *Howard Drilling*

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.