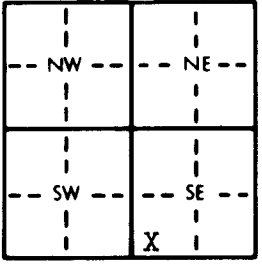


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: **CLARK** Fraction: **SW 1/4 SW 1/4 SE 1/4** Section Number: **12** Township Number: **T 32 S** Range Number: **R 21 E/W**

Distance and direction from nearest town or city street address of well if located within city?  
**6 North, 5 1/2 East, 1/2 North of Sitka, Kansas**

2 WATER WELL OWNER: **Mr. Del Carter**  
 RR#, St. Address, Box #: **Box 71**  
 City, State, ZIP Code: **Simla, Colorado 80835**  
 Board of Agriculture, Division of Water Resources  
 Application Number: **--**

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 4 DEPTH OF COMPLETED WELL: **80** ft. ELEVATION: **Slope**  
 Depth(s) Groundwater Encountered: **1. Not available** ft. 2. **Not available** ft. 3. **Not available** ft.  
 WELL'S STATIC WATER LEVEL: **17** ft. below land surface measured on **mo/day/yr** **October 23, 1991**  
 Pump test data: Well water was **Not available** ft. after **Not available** hours pumping **Not available** gpm  
 Est. Yield: **40** gpm; Well water was **Not available** ft. after **Not available** hours pumping **Not available** gpm  
 Bore Hole Diameter: **10** in. to **80** ft., and **Not available** in. to **Not available** ft.  
 WELL WATER TO BE USED AS:  
 Domestic     3 Feedlot     6 Oil field water supply     9 Dewatering     12 Other (Specify below)  
 2 Irrigation     4 Industrial     7 Lawn and garden only     10 Monitoring well  
 Was a chemical/bacteriological sample submitted to Department? Yes **Not available** No **XX**; If yes, mo/day/yr sample was submitted **Not available**  
 Water Well Disinfected? Yes **XX** No **Not available**

5 TYPE OF BLANK CASING USED:  
 1 Steel     3 RMP (SR)     5 Wrought iron     8 Concrete tile    CASING JOINTS:  Glued **XX**  Clamped **Not available**  
 PVC     4 ABS     6 Asbestos-Cement     9 Other (specify below)     Welded **Not available**  
 7 Fiberglass     Threaded **Not available**  
 Blank casing diameter: **5** in. to **40** ft., Dia **Not available** in. to **Not available** ft., Dia **Not available** in. to **Not available** ft.  
 Casing height above land surface: **18** in., weight **2.8** lbs./ft. Wall thickness or gauge No. **265**  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 PVC     10 Asbestos-cement  
 1 Steel     3 Stainless steel     5 Fiberglass     8 RMP (SR)     11 Other (specify) **Not available**  
 2 Brass     4 Galvanized steel     6 Concrete tile     9 ABS     12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE:  
 1 Continuous slot     3 Mill slot     5 Gauzed wrapped     Saw cut     11 None (open hole)  
 2 Louvered shutter     4 Key punched     6 Wire wrapped     9 Drilled holes  
 7 Torch cut     10 Other (specify) **Not available**  
 SCREEN-PERFORATED INTERVALS: From **40** ft. to **80** ft., From **Not available** ft. to **Not available** ft.  
 From **Not available** ft. to **Not available** ft., From **Not available** ft. to **Not available** ft.  
 GRAVEL PACK INTERVALS: From **20** ft. to **80** ft., From **Not available** ft. to **Not available** ft.  
 From **Not available** ft. to **Not available** ft., From **Not available** ft. to **Not available** ft.

6 GROUT MATERIAL:  1 Neat cement     2 Cement grout     Bentonite     4 Other **Not available**  
 Grout Intervals: From **0** ft. to **20** ft., From **Not available** ft. to **Not available** ft., From **Not available** ft. to **Not available** ft.  
 What is the nearest source of possible contamination:  
 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) **Not available**  
 13 Insecticide storage **Not available**  
 Direction from well? **South** How many feet? **150**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Topsoil			
2	21	Clay			
21	24	Fine Sand			
24	44	Clay			
44	78	Med. Sand			
78	80	Red Bed			

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) **October 23, 1991** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **252** This Water Well Record was completed on (mo/day/year) **October 28, 1991** under the business name of **Friesen Windmill & Supply Inc.** by (signature) *[Signature]*

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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OFFICE USE ONLY  
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SEC.  
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