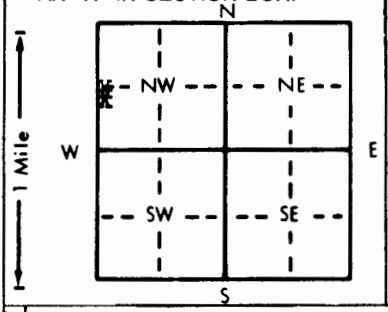
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Meade	NW ¼ SW ¼ NW ¼	26	T 32 S	R 28 E (W)

Distance and direction from nearest town or city street address of well if located within city?
2 3/4 Miles South of Meade, Kansas

2 WATER WELL OWNER: Frieda Isaac
RR#, St. Address, Box # : Box 447
City, State, ZIP Code : Meade, KS 67864
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 100 ft. ELEVATION: Slope
Depth(s) Groundwater Encountered 1. Not Available 2. ..... ft. 3. ..... ft.
WELL'S STATIC WATER LEVEL 34 ft. below land surface measured on mo/day/yr Nov. 1, 1988
Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm
Est. Yield 30 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm
Bore Hole Diameter 10 in. to 100 ft., and ..... in. to ..... ft.
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
XX 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 ..... No XX ; If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes XX No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued XX Clamped
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
XX PVC 4 ABS 7 Fiberglass ..... Threaded
Blank casing diameter 5 in. to 60 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.
Casing height above land surface 15 in., weight 2.8 lbs./ft. Wall thickness or gauge No. .265

TYPE OF SCREEN OR PERFORATION MATERIAL: XX PVC 10 Asbestos-cement
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) .....
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped XX Saw cut 11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....

SCREEN-PERFORATED INTERVALS: From 60 ft. to 100 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 20 ft. to 100 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite XX Other Baroid Hole Plug
Grout Intervals: From 0 ft. to 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination:
XX 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 .....
Direction from well? West How many feet? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Topsoil			
3	16	Clay			
16	29	Med. Sand			
29	41	Blue Clay			
41	96	Med. Gravel			
96	100	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) November 2, 1988 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/yr) November 14, 1988 under the business name of Friesen Windmill & Supply Inc. by (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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

07-88000023 3

OFFICE USE ONLY T R E/W SEC. ¼ ¼ ¼