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

1 LOCATION OF WATER WELL: County: Meade | Fraction: SW ¼ NW ¼ NW ¼ | Section Number: 9 | Township Number: T 33 S | Range Number: R 28 E/W

Distance and direction from nearest town or city? 5 South, 2 West, 1¼ South of Meade, Ks.

Street address of well if located within city?

2 WATER WELL OWNER: Southwest Gas Storage Sneath 1-9
RR#, St. Address, Box # : Box 959, Underground Storage Div.
City, State, ZIP Code : Meade, Kansas
Board of Agriculture, Division of Water Resources Application Number: ---

3 DEPTH OF COMPLETED WELL 180 ft. Bore Hole Diameter 9 7/8 in. to 180 ft., and ____ in. to ____ ft.

Well Water to be used as: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply XXXX Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below)

Well's static water level 25 ft. below land surface measured on November month 10 day 1980 year

Pump Test Data: Well water was ____ ft. after ____ hours pumping ____ gpm
Est. Yield 100 gpm: Well water was ____ ft. after ____ hours pumping ____ gpm

4 TYPE OF BLANK CASING USED: XXX PVC | 1 Steel | 3 RMP (SR) | 4 ABS | 5 Wrought iron | 6 Asbestos-Cement | 7 Fiberglass | 8 Concrete tile | 9 Other (specify below)

Casing Joints: Glued XX Clamped ____ Welded ____ Threaded ____

Blank casing dia 5 in. to 100 ft., Dia ____ in. to ____ ft., Dia ____ in. to ____ ft.
Casing height above land surface 12 in., weight 2.8 lbs./ft. Wall thickness or gauge No .265

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

Screen or Perforation Openings Are: 1 Continuous slot | 2 Louvered shutter | 3 Mill slot | 4 Key punched | 5 Gauzed wrapped | 6 Wire wrapped | 7 Torch cut | XXXX Saw cut | 9 Drilled holes | 10 Other (specify) | 11 None (open hole)

Screen-Perforation Dia 5 in. to 180 ft., Dia ____ in. to ____ ft., Dia ____ in to ____ ft.
Screen-Perforated Intervals: From 100 ft. to 180 ft., From ____ ft. to ____ ft.
From ____ ft. to ____ ft., From ____ ft. to ____ ft.
Gravel Pack Intervals: From 14 ft. to 180 ft., From ____ ft. to ____ ft.
From ____ ft. to ____ ft., From ____ ft. to ____ ft.

5 GROUT MATERIAL: XXX Neat cement | 2 Cement grout | 3 Bentonite | 4 Other ____
Grouted Intervals: From 4 ft. to 14 ft., From ____ ft. to ____ ft., From ____ ft. to ____ ft.

What is the nearest source of possible contamination: 1 Septic tank | 2 Sewer lines | 3 Lateral lines | 4 Cess pool | 5 Seepage pit | 6 Pit privy | 7 Sewage lagoon | 8 Feed yard | 9 Livestock pens | 10 Fuel storage | 11 Fertilizer storage | 12 Insecticide storage | 13 Watertight sewer lines | XXX 5 Oil well/Gas well | 14 Abandoned water well | 16 Other (specify below)

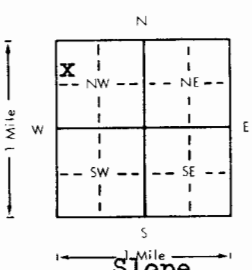
Direction from well Northeast How many feet 250 ? Water Well Disinfected? Yes XXX No

Was a chemical/bacteriological sample submitted to Department? Yes ____ No XXX ____ If yes, date sample was submitted ____ month ____ day ____ year: Pump Installed? Yes XXX Rental Pump Installed

If Yes: Pump Manufacturer's name Aermotor Model No. ? HP ? Volts 220
Depth of Pump Intake ? ft. Pumps Capacity rated at ? gal./min.
Type of pump: XXX Submersible | 2 Turbine | 3 Jet | 4 Centrifugal | 5 Reciprocating | 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on November month 10 day 1980 year, 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 November month 17 day 1980 year under the business name of Friesen Windmill & Supply, Inc. by (signature)

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



ELEVATION: Slope

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5	Topsoil			
5	10	Clay			
10	16	Med. to Lar. Sand			
16	52	Blue Clay			
52	68	Clay			
68	99	Clay w/some Sand Streaks			
99	124	Med. to Lar. Sand			
124	141	Clay			
141	175	Fine Sand with small Cla y Streaks			
175	180	Red Bed			

Depth(s) Groundwater Encountered 1. Not available ft. 3 ____ ft. 4 ____ ft. (Use a second sheet if needed)

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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 33 R 28 (E/W) SEC. 9 SW ¼ NW ¼ NW ¼