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

1 LOCATION OF WATER WELL	Fraction			Section Number	Township Number	Range Number
County: Meade	SW ¼	SW ¼	NW ¼	11	T 33 S	R 28 E/W

Distance and direction from nearest town or city?	Street address of well if located within city?
6½ Miles South of Meade, Ks.	

2 WATER WELL OWNER: Southwest Gas Storage, Underground Storage

RR#, St. Address, Box # : Box 959

City, State, ZIP Code : Meade, Ks. 67864   WIENS 1-11

Board of Agriculture, Division of Water Resources
Application Number: ---

3 DEPTH OF COMPLETED WELL 204 ft. Bore Hole Diameter 7 7/8 in. to 204 ft., and in. to ft.

Well Water to be used as:

1 Domestic	3 Feedlot	5 Public water supply	8 Air conditioning	11 Injection well
2 Irrigation	4 Industrial	XXX Oil field water supply	9 Dewatering	12 Other (Specify below)
		7 Lawn and garden only	10 Observation well	

Well's static water level 133 ft. below land surface measured on April month 4 day 1981 year

Pump Test Data : Well water was ft. after hours pumping. gpm

Est. Yield 50 gpm: Well water was ft. after hours pumping gpm

4 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	Casing Joints: Glued XX Clamped
XXX PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
		7 Fiberglass		Threaded

Blank casing dia 5 in. to 164 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: XXX7 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:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	XXX8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify)	

Screen-Perforation Dia 5 in. to 204 ft., Dia in. to ft., Dia in to ft.

Screen-Perforated Intervals: From 164 ft. to 204 ft., From ft. to ft.

From ft. to ft., From ft. to ft.

Gravel Pack Intervals: From 14 ft. to 204 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	4 Cess pool	7 Sewage lagoon	10 Fuel storage	14 Abandoned water well
2 Sewer lines	5 Seepage pit	8 Feed yard	11 Fertilizer storage	XXX15 Oil/Gas well
3 Lateral lines	6 Pit privy	9 Livestock pens	12 Insecticide storage	16 Other (specify below)
			13 Watertight sewer lines	

Direction from well Southeast How many feet 100 ? 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 Rental Pump No

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 April month 4 day 1981 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 April month 9 day 1981 year under the business

name of Friesen Windmill & Supply, Inc. by (signature)

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	4	Topsoil			
	4	140	Clay			
	140	193	Med. Sand			
	193	204	Red Bed			

Section box grid:
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        N
 -- NW --|-- NE --
 X       |
W--------|--------E
 -- SW --|-- SE --
        S
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1 Mile (vertical), 1 Mile (horizontal)

ELEVATION: Upland

Depth(s) Groundwater Encountered 1. Not available ft. 2. 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. 11   SW¼ SW¼ NW¼