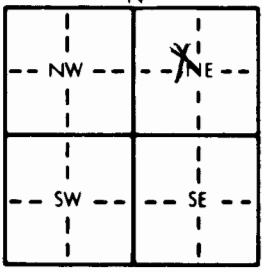


MW-8 2311100		WATER WELL RECORD		Form WWC-5		KSA 82a-1212					
1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number			
County: <u>Stevens</u>		<u>SE 1/4 NW 1/4 NE 1/4</u>		<u>16</u>		<u>T 33 S</u>		<u>R 37 EW</u>			
Distance and direction from nearest town or city street address of well if located within city? <u>E 7 300 S. Monroe on 3rd St.</u>											
2 WATER WELL OWNER:											
RR#, St. Address, Box # : <u>Mrs. W. F. Ramsey</u>											
<u>909 N. Maize Rd #212</u>											
City, State, ZIP Code : <u>Wichita KS 67212</u>											
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: <u>9.5.5</u> ft. ELEVATION: <u>1302.42</u>									
		Depth(s) Groundwater Encountered <u>1.79</u> ft. 2. ft. 3. ft.									
		WELL'S STATIC WATER LEVEL <u>77.85</u> ft. below land surface measured on mo/day/yr <u>2-9-96</u>									
		Pump test data: Well water was ft. after hours pumping gpm									
		Est. Yield gpm: Well water was ft. after hours pumping gpm									
		Bore Hole Diameter <u>8</u> in. to ft. and in. to ft.									
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)									
		2 Irrigation 4 Industrial 7 Lawn and garden only <u>10 Monitoring well</u>									
		Was a chemical/bacteriological sample submitted to Department? Yes No <u>X</u> If yes, mo/day/yr sample was submitted									
		Water Well Disinfected? Yes No <u>X</u>									
5 TYPE OF BLANK CASING USED:											
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped											
<u>2 PVC</u> 4 ABS 7 Fiberglass Welded											
Blank casing diameter <u>2</u> in. to ft. Dia. in. to ft. Dia. in. to ft.											
Casing height above land surface <u>Flush</u> in., weight <u>703</u> lbs./ft. Wall thickness or gauge No. <u>Sch 40</u>											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement											
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify)											
12 None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
1 Continuous slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)											
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes											
3 Mill slot 7 Torch cut 10 Other (specify)											
SCREEN-PERFORATED INTERVALS: From <u>75</u> ft. to <u>95</u> ft. From ft. to ft.											
From ft. to ft. From ft. to ft.											
GRAVEL PACK INTERVALS: From <u>71</u> ft. to <u>95.5</u> ft. From ft. to ft.											
From ft. to ft. From ft. to ft.											
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other											
Grout Intervals: From <u>1.0</u> ft. to <u>71</u> 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 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? How many feet?											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
0.0		7.0		<u>Silt</u>							
7.0		21.0		<u>Clay</u>							
21.0		85.0		<u>Sand</u>							
85.0		95.5		<u>Interbedded sands, gravel & pebbles w/ caliche layers</u>							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>2-9-96</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>539</u> This Water Well Record was completed on (mo/day/yr) <u>3-13-96</u> under the business name of <u>GSI</u> by (signature) <u>Allison J. J. J.</u>											
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.											