

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

I LOCATION OF WATER WELL: County: Barber Fraction NW 1/4 NW 1/4 SW 1/4 Section Number 11 Township Number T 35 S Range Number R 11 EW

2 WATER WELL OWNER: D&B Stores RR#, St. Address, Box # 400 Main City, State, ZIP Code Kiowa, KS 67070

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: [Diagram showing a 36-section grid with 'X' in the NW section] 4 DEPTH OF COMPLETED WELL 20 ft. Depth(s) Groundwater Encountered (1) 12.5 ft. (2) ... (3) ...

5 TYPE OF CASING USED: 2 PVC 3 RMP (SR) 4 ABS 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Threaded X

6 GROUT MATERIAL: 3 Bentonite 4 Other Grout Intervals: From 8 ft. to 0 ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)

Table with 6 columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Rows include Gravel fill, Moist, stiff, silty clay, Grey clay with trace silt, Light grey silt, and DMW-14.

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) 12-15-06 and this record is true to the best of my knowledge and belief.

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, Geology Section, 1 000 SW Jackson St., Suite 420, Topeka, Kansas 66612- 1 367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdhe.state.ks.us/geo/waterwells.