| WATER WELL RECORD   |  |                  |                |                  |                             | For       | rm WWC       | -5                    | Division of Water Resources; App. No.   |           |  |                          |
|---|--|------------------|----------------|------------------|-----------------------------|-----------|--------------|-----------------------|---|-----------|--|--------------------------|
| Cour  | ATION OF   | 1h               |                |                  |                             | Fractic   | SN 1/4 1     | 1/4                   | Section N                               | umber     | Township Number T 3 S                    | Range Number R 13        |
| locat   |  | ty?34            | lest,          | 1/2/             | Votes                       | 1, /2     | address of w | <i>-</i> '            | Latitude:                               |           | Systems (decimal degr                    |                          |
| 2 WATER WELL OWNER: JE WILSON   |  |                  |                |                  |                             |           | ,            | Longitude: Elevation: |   |           |  |                          |
| RR#   | , St. Addres   | s, Box #         | ‡ : <b>/</b> : | 3 <i>06</i> 6    | 2 /6                        | 55 Kd     | <i>!</i>     |                       | Datum                                   |           |  |                          |
| City  | , State, ZIP   | Code             | : <            | Smit             | u Ce                        | ntcl      | . KS 66      | 967                   | Data Col                                | lection l | Method:                                  |                          |
| 3 LOC   | ATE WEL  | L'S 4            | DEP'           | TH OF            | COM                         | PLETED    | WELL         | 56                    | • | ft.       | Method:                                  |                          |
|   | ATION  | - 1              |                |                  |                             |           |              |                       |   |           |  |                          |
|   | WITH AN "X" IN SECTION BOX:  N  Depth(s) Groundwater Encountered (1) |                  |                |                  |                             |           |              |                       |   |           |  | 3/18/07                  |
| Pump test data: Well water wasft. after   |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
| WELL WATER TO BE USED AS: 5 Public water supply  WELL WATER TO BE USED AS: 5 Public water supply  Best. Yield. 22gpm: Well water was  |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
|   |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
| 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well   |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
| SW SE Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs   |  |                  |                |                  |                             |           |              |                       |   |           |  | If yes, mo/day/yrs       |
| Sample was submitted  |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
|   | S  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
| 5 TYPI  | E OF CASI  |                  |                |                  | rought                      |           |              |                       |   | CASINO    | G JOINTS: Glued                          |                          |
|   |  | 3 RMP (<br>4 ABS |                |                  | sbestos<br>be <u>rg</u> las | -Cement   | 9 Othe       | r (specify            | below)                                  |           | Weided<br>Threaded                       |                          |
| Blank   |  |                  |                |                  |                             | ft Г      | Diameter     | ir                    | . to                                    | ft        | Diameter                                 | in. toft.                |
| Casing I  | neight above   | land su          | rface          | <i>a</i>         | 4                           | in., V    | Veight       | 0                     | bs./ft.                                 | Wall thi  | ckness or guage No.                      |                          |
| TYPE C  | F SCREEN   | OR PE            | RFOR.          | ATION            | MATE                        | ERIAL:    |              |                       |   |           |  |                          |
|   |  | 3 Stainle        |                |                  |                             | rglass    | 7/PVQ        |                       | BS                                      |           |  |                          |
|   |  |                  |                |                  |                             |           | 8 RM (SR     | (a) 10 A              | sbestos-C                               | ement     | 12 None used (open                       | hole)                    |
|   | N OR PERF  |                  |                |                  |                             |           | anned 7 T    | orch cut              | 9 Drille                                | d holes   | 11 None (onen ho                         | ale)                     |
| 1 Continuous slot (3 Mill slot 5 Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut, 10 Other (specify)   |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
| SCREEN-PERFORATED INTERVALS: From   |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
| From  |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
| GRAVEL PACK INTERVALS: From 50 ft. to 56 ft., From ft. to ft.  From ft. to ft., From ft. to ft.   |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
|   |  |                  |                |                  | From.                       |           | n. to .      |                       | п.,                                     | rrom      | It. to                                   | It.                      |
| 6 GRO   | UT MATE  | RIAL:            | 1 Ne           | at ceme          | nt 2                        | Cement g  | grout Be     | ntonite               | 4 Other                                 |           |  |                          |
| Grout In  | itervals:  | From             | d              | <b>Q</b> ft      | . to                        | <i></i>   |              |                       |   |           | t., From                                 |                          |
|   | the nearest  | source o         |                |                  |                             |           |              |                       | ,                                       | 12.7      |  | 1604 / 10                |
|   | Septic tank<br>Sewer lines   |                  |                | Latera<br>Cess p |                             | 7 Pit pri |              | 0 Livesto             |   |           | secticide Storage<br>bandoned water well | 16 Other (specify below) |
|   | Watertight s   |                  |                | •                |                             | -         |              | 12 Fertiliz           |   |           | l well/gas well                          | below)                   |
|   | n from well  |                  |                |                  | 50 pit                      |           |              |                       |   |           |  |                          |
| FROM  | TO   |                  |                | LITHO            | LOGIO                       | CLOG      |              | FROM                  | TO                                      |           | PLUGGING INT                             |                          |
| 0   | 10   | TOP              | 501            | 12               |                             |           |              |                       |   |           |  |                          |
| 10  | 35   | BLOW             | ng             | 149              |                             |           |              |                       |   |           |  |                          |
| <i>3</i> 5_   | 53   | Blue             | md,            | SAL              | 1, m                        | edal      | Zavel        |                       |   |           |  |                          |
| 36  | -  | Sna              | Re.            |                  |                             | <u> </u>  |              |                       |   |           |  |                          |
|   |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
|   |  |                  |                |                  |                             |           |              | +                     |   |           |  |                          |
|   |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
|   |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
|   |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
| 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)  |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
| under the business name of head wall Well Sevil by (signature)  |  |                  |                |                  |                             |           |              |                       |   |           |  |                          |
| under th  | e business n   | typewrite        | er or ball     | non              | n PIF                       | ASE PRESS | FIRMLY and   | by<br>PRINT clear     | (Signatu                                | re)       | s underline or circle the lo             | errect answers. Send ton |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. 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  |  |                  |                |                  |                             |           |              |                       |   |           |  | well. Visit us at        |
| http://ww   |  | HS/GEO/WS        | arer Wells     |                  |                             |           |              |                       |   |           |  |                          |