WATER WELL RECORD Form WWC-5 Division of Water Resources; App. No.												
1 LOCATION OF WATER WELL: County: Smith			Fraction NW 1/4	NW ¼	NW ¼	Section N	lumber	Township Num	ber S	Range Number		
Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digity												
located within city? 215 E. Hwy 36 Smith Center, KS Latitude: N 39.78490°												
2 WATER WELL OWNER: Murphy's Service (Formerly)							Longitude: W 98.78390°					
DD# 6	RR#, St. Address, Box # : 316 E. Court St.							Elevation: RIM: 1796.97; TOC: 1796.51  Datum: above mean sea level				
City S	state ZIP Co	BOX# : 310 E.	Court St.	66067		Datum:	abov	e mean sea level				
RR#, St. Address, Box # : 316 E. Court St. City, State, ZIP Code : Smith Center, KS 66967  Datum: above mean sea level Data Collection Method: legal survey  The complete of t												
DECATE WEELS 4 DEI III OF COMI LETED WELL 25												
l		7 7 1() 0	1			MW3			•			
l	WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft. WELL'S STATIC WATER LEVEL 18.67 ft. below land surface measured on mo/day/yr 8/14/08											
SECT	SECTION BOX: WELL'S STATIC WATER LEVEL 18.67 ft. below land surface measured on mo/day/yr 8/14/08											
N Pump test data: Well water was ft. after hours pumping gpm												
N Pump test data: Well water was ft. after hours pumping gpm  X Est. Yield gpm: Well water was ft. after hours pumping gpm												
NW NE   WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well												
Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)												
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) (10) Monitoring well												
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs												
S Sample was submitted Water Well Disinfected? Yes No X												
F TYPE OF CACING LICED. 5 Wassale I 0 Constatilly CACRDIC LODING CL. 1												
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped												
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded												
PVC     4 ABS     7 Fiberglass     Threaded X       Blank casing diameter     2 in. to     15 ft., Dia in. to     ft., Dia in. to     ft., Dia in. to												
Blank casing diameter 2 in. to 15 ft., Dia in. to ft., Dia in. to ft.												
Casing height below land surface 0.46 ft., Weight lbs./ft. Wall thickness or gauge No.  TYPE OF SCREEN OR PERFORATION MATERIAL:												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)												
2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
1 Continuous slot (3) Mill slot 5 Guaze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)												
1 Continuous slot 3 Mill slot 5 Guaze 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 15 ft. to 25 ft. From ft. to ft.												
BORDEN-TERPORATED INTERVALS. FIGHT 15 II. 10 25 II. FIGHT II. 10 II.												
From ft. to ft. From ft. to ft.												
GRAVEL PACK INTERVALS: From 14 ft. to 25 ft. From ft. to ft.												
From ft. to ft. From ft. to ft.												
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-2 ft.  Grout Intervals From 2 ft. to 14 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 13 Insecticide Storage 16 Other (specify												
	ver lines	5 Cess poo						andoned water we	ell	below)		
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well												
	from well?	N	•	•		ny feet? ~		War Ban War				
						<u> </u>	<del></del>	DI VICCONIC		777476		
FROM	TO	_	LOGIC LO	<u>u</u>	FRO	M TO		PLUGGING :	INTE	KVALS		
0		Concrete				-						
3	10	Brown, clayey silt Yellow brown clay	, moist, no	odor								
13		gray mottling, mo			<del>-  </del>							
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7 CONT	RACTOR'S	OR LANDOWN	ER'S CER	TIFICAT	ION: Thi	s water well	was (1)	onstructed (2) reco	onstru	cted, or (3) plugged		
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)  8/13/08  and this record is true to the best of my knowledge and belief.												
		tractor's License No.										
		of Larsen & Ass			by (sign		4					
i .								of Health and Enviro	nment	Bureau of Water.		
INSTRUCTIONS: Please fill in blanks 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 Fend one to WATER WELL OWNER and retain one for												
your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.												