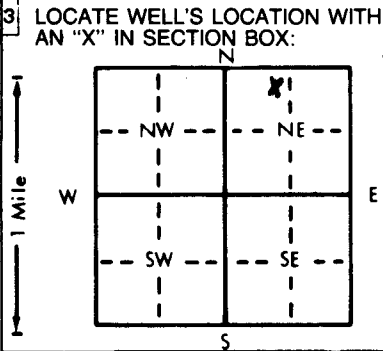


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Rawlins	NE ¼ NW ¼ NE ¼	8	T 3 S	R 33 E (N)

Distance and direction from nearest town or city street address of well if located within city?
209 Grant Street, Atwood, Kansas MW 4

2 WATER WELL OWNER: **Rod Beamgard**
 RR#, St. Address, Box # : **P. O. Box 197** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Atwood, Ks. 67730** Application Number:



4 DEPTH OF COMPLETED WELL... **18** ft. ELEVATION:
 Depth(s) Groundwater Encountered 1... **12** ft. 2... ft. 3... ft.
 WELL'S STATIC WATER LEVEL... **12.06** ft. below land surface measured on mo/day/yr **10-28-91**
 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... **7 5/8** in. to... **18** 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 **(10) Monitoring well**
 Was a chemical/bacteriological sample submitted to Department? Yes... No... **X**... If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes No **X**

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued... Clamped...
(2) PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded...
 7 Fiberglass Threaded... **X**
 Blank casing diameter... **2** in. to... **8** ft., Dia... in. to... ft., Dia... in. to... ft.
 Casing height above land surface... **0** in., weight... lbs./ft. Wall thickness or gauge No. **Schedule 40**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass **(7) PVC** 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 **(3) Mill slot** 5 Gauzed wrapped 8 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-PERFORATED INTERVALS: From... **8** ft. to... **18** ft., From... ft. to... ft.
 From... ft. to... ft., From... ft. to... ft.
 GRAVEL PACK INTERVALS: From... **6** ft. to... **18** 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 ...
 Grout Intervals: From... **0** ft. to... **1** (cement) ft., From... **1** ft. to... **6** (bent) ft., From... ft. to... ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy **(11) Fuel storage** 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage ...
 Direction from well? **South** How many feet? **2**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	6	Clay, brown silty			KDHE Site Tag # 00027524 Flush mount well cover
6	12	Silt, dark grey, clay			
12	18	Silt, light grey			

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) ... **10-10-91** ... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ... **527** ... This Water Well Record was completed on (mo/day/yr) ... **10-31-91** ... under the business name of **GeoCore Services, Inc.** by (signature) **Dale Roll**

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.