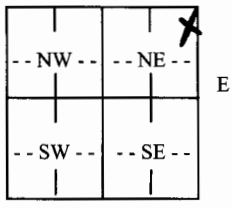


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Cloud	Fraction NE ¼ NE ¼ NE ¼	Section Number 21	Township Number T 6 S	Range Number R 2 EW
Distance and direction from nearest town or city street address of well if located within city? 7 miles East & 3 miles South of Concordia, Ks.		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: Brad Nease RR#, St. Address, Box # : 1489 N. 210th Rd. City, State, ZIP Code : Concordia, Ks. 66901				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  W E S	4 DEPTH OF COMPLETED WELL 63..... ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... 36 ft. below land surface measured on mo/day/yr. 11/14/07 Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield 18-20 gpm: Well water was.....ft. after..... hours pumping..... gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="checkbox"/> Domestic 3 Feedlot 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 <input checked="" type="checkbox"/>; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> No
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5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) <input checked="" type="checkbox"/> PVC 4 ABS 7 Fiberglass	5 Wrought Iron 8 Concrete tile 6 Asbestos-Cement 9 Other (specify below)	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped..... Welded..... Threaded.....
Blank casing diameter 5 in. to 4.8 ft., Diameter..... in. to ft., Diameter..... in. to ft. Casing height above land surface..... 1.2 in., Weight .2.37 lbs./ft. Wall thickness or gauge No. 2.14		
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <input checked="" type="checkbox"/> 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)		
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot <input checked="" type="checkbox"/> Mill slot 5 Gauzed 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..... 4.8 ft. to 6.3 ft., From..... ft. to ft. From..... ft. to ft., From..... ft. to ft.		
GRAVEL PACK INTERVALS: From..... 2.0 ft. to 6.3 ft., From..... ft. to ft. From..... ft. to ft., From..... ft. to ft.		

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> Bentonite 4 Other	Grout Intervals: From 0 ft. to 20 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 below) 2 Sewer lines 5 Cess pool <input checked="" type="checkbox"/> Sewage lagoon 11 Fuel storage 14 Abandoned water well below 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well		
Direction from well? Northwest How many feet? 150'		

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Topsoil			
2	13	Clay, tan			
13	17	Sandstone			
17	24	Shale, gray			
24	37	Sandstone			
37	45	Shale, gray			
45	63	Sandstone, tan w/shale layers			
63	68	Sandstone, dk brown			
68	100	Shale, gray w/small gray sandstone layers			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **11/15/07** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **138**..... This Water Well Record was completed on (mo/day/year) **11/26/07**..... under the business name of **Peterson Irrigation, Inc.** by (signature) *Mike Peters*

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, 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 <http://www.kdheks.gov/waterwell/index.html>.