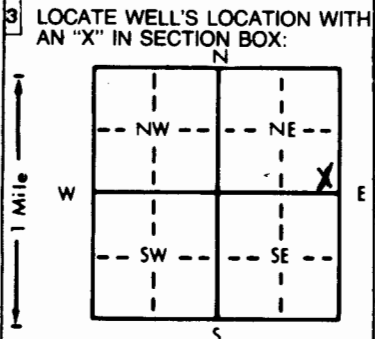


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: OSBORNE	Fraction SE 1/4 SE 1/4 NE 1/4	Section Number 18	Township Number T 7 S	Range Number R 212 E/W
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Distance and direction from nearest town or city street address of well if located within city?
522 S 7th OSBORNE KS

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	MARVIN MANS 522 S 7th OSBORNE KS 67473	Board of Agriculture, Division of Water Resources Application Number:
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4 DEPTH OF COMPLETED WELL: 50 ft. ELEVATION:	Depth(s) Groundwater Encountered 1. 40 ft. 2. _____ ft. 3. _____ ft.
WELL'S STATIC WATER LEVEL: 32 ft. below land surface measured on mo/day/yr 8-28-01	Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
Est. Yield 25+ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm	Bore Hole Diameter: 10 in. to 50 ft., and _____ in. to _____ ft.
WELL WATER TO BE USED AS:	
5 Public water supply	8 Air conditioning
1 Domestic	3 Feedlot
2 Irrigation	4 Industrial
	<input checked="" type="checkbox"/> Lawn and garden only
	11 Injection well
	9 Dewatering
	12 Other (Specify below)
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 _____ No <input checked="" type="checkbox"/>	

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
<input checked="" type="checkbox"/> PVC	4 ABS	7 Fiberglass	10 Asbestos-cement
Blank casing diameter: 5 in. to 34 ft., Dia _____ in. to _____ ft.			11 Other (specify) _____
Casing height above land surface: 18 in., weight 160 lbs./ft. Wall thickness or gauge No. _____			12 None used (open hole)
TYPE OF SCREEN OR PERFORATION MATERIAL: <input checked="" type="checkbox"/> PVC			
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
SCREEN OR PERFORATION OPENINGS ARE:			
1 Continuous slot	<input checked="" type="checkbox"/> Mill slot	5 Gauzed wrapped	8 Saw cut
2 Louvered shutter	4 Key punched	6 Wire wrapped	11 None (open hole)
		7 Torch cut	9 Drilled holes
SCREEN-PERFORATED INTERVALS: From 34 ft. to 50 ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From 25 ft. to 50 ft., From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	<input checked="" type="checkbox"/> Bentonite
GROUT INTERVALS: From 0 ft. to 25 ft., From _____ ft. to _____ ft.			4 Other _____
What is the nearest source of possible contamination:			
1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage
			13 Insecticide storage
			14 Abandoned water well
			15 Oil well/Gas well
			16 Other (specify below)

Direction from well?		LITHOLOGIC LOG		PLUGGING INTERVALS	
FROM	TO	FROM	TO	FROM	TO
0	4				
		SURFACE CLAY			
4	20				
		SOFT BL BLACK SILT			
20	30				
		SUGAR SAND			
30	35				
		FINE SAND			
35	45				
		MED SAND			
45	50				
		BLUE SHALE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 8-28-01 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 444 This Water Well Record was completed on (mo/day/yr) 8-28-01 under the business name of ANDY ANDERSON & DRILLING by (signature) <i>Andy Anderson</i>
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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.

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