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

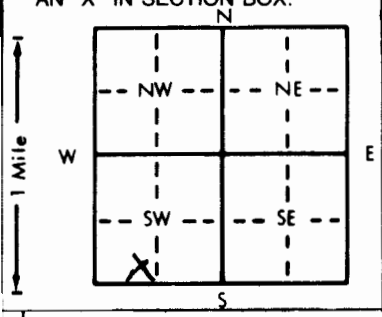
1 LOCATION OF WATER WELL: County: Graham	Fraction: SE ¼ SW ¼ SW ¼	Section Number: 36	Township Number: T 7 S	Range Number: R 25 E/W

Distance and direction from nearest town or city street address of well if located within city? 3 N of moreland

2 WATER WELL OWNER: Mary Sanger Trustee
RR#, St. Address, Box # : X
City, State, ZIP Code : X Morland Kans. 67650

Board of Agriculture, Division of Water Resources Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL X 132 ft. ELEVATION:
Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.
WELL'S STATIC WATER LEVEL X 100 ft. below land surface measured on mo/day/yr
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 in. to 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; If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED: X 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped
(1) Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
2 PVC 4 ABS 7 Fiberglass Threaded
Blank casing diameter X 16 in. to X 133 ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface X 2' in., weight lbs./ft. Wall thickness or gauge No.
TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.
From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.
From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: X 1 Neat cement 2 Cement grout 3 Bentonite 4 Other gravel
Grout Intervals: From X 0 ft. to X 133 ft., From ft. to ft., From ft. to ft.
What is the nearest source of possible contamination: X Nothing close
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
13 Insecticide storage
Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	~~PLUGGING INTERVALS~~
					Capping Criteria
					X Flat steel plate bolted
					to top of pump base

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) X Dec. 20-88 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/yr) X 1-10-89
under the business name of by (signature) X Leonard M. Papson

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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T R E/W SEC. ¼ ¼ ¼