

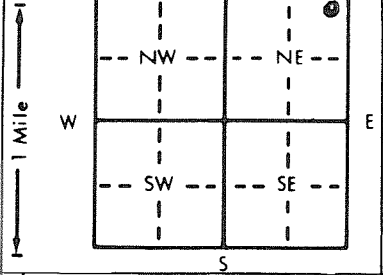
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: Fraction NE 1/4 NE 1/4 NE 1/4 Section Number 32 Township Number T 9 S Range Number R 20 EW
 County: Rooks

Distance and direction from nearest town or city street address of well if located within city?
285 X Road, Palco, KS.

2 WATER WELL OWNER: Delbert Ostrom
 RR#, St. Address, Box #: 285 X Road Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Palco, Ks. Application Number:

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



4 DEPTH OF COMPLETED WELL: 40' ft. ELEVATION: _____ ft.
 Depth(s) Groundwater Encountered 1. 33' ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 32.72 ft. below land surface measured on mo/day/yr 12-4-96
 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: 8 1/2" in. to 40" 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 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: 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 X
 Blank casing diameter 2.375 in. to 25' ft. Dia _____ in. to _____ ft. Dia _____ in. to SDR 13 ft.
 Casing height above land surface Flush Ht. in., weight _____ lbs./ft. Wall thickness or gauge No. _____ SCh. 40

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 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From 40' ft. to 25' ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 40' ft. to 23' 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 23' to 4' ft. From 4' ft. to 0' 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 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage Founer 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? Northwest How many feet? 85'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Gravel, road pack, dry, hard.			
1	4	Dk brn-blk clay, dry, tight, no odor, no plasticity.			
4	13.50	Tan brn clay, dry, no odor, tight.			
13.50	19	Pale gray tan silty clay w/ caliche & trace of fine-med sand.			
19	25.50	Pink to lt red brn sandy clay, dry-moist, no odor.			
25.50	33	Pink-lt brn clayey sand, moist, no odor w/ caliche stringers, fine-coarse sand.			
33	35	Fine-very coarse wet sand, no odor.			<u>F.M. OK'd by Don Taylor</u>
35	40	Fine-coarse to very coarse sand, wet, no odor, subrounded.			

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) 12-4-96 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 539 This Water Well Record was completed on (mo/day/yr) 12-16-96 under the business name of JB Environmental Drilling by (signature) James Beber

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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