S. 1-31-77

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

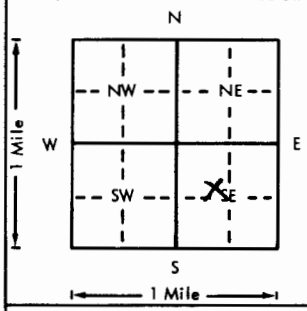
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Dickinson	SE 1/4 NW 1/4 SE 1/4	20	T 12 S	R 4 (E/W)

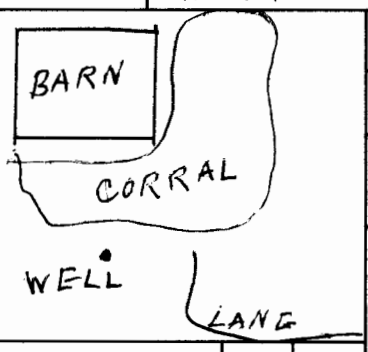
2. Distance and direction from nearest town or city: 1 mi N, ½ E Chapman
Street address of well location if in city:

3. Owner of well: DeWain Krinhop
R.R. or street: Chapman, Kans.
City, state, zip code:

4. Locate with "X" in section below:



Sketch map:



6. Bore hole dia. 8 in. Completion date
Well depth 124 ft. 11/10/75

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning X Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material Plst Height (Above) or below
Threaded ___ Welded gl Surface 18 in.
RMP ___ PVC X Weight ___ lbs./ft.
Dia. 5 in. to 124 ft. depth Wall Thickness inches or
Dia. ___ in. to ___ ft. depth gage No. 0.214

5. Type and color of material	From	To
Flint & rock & mixed clay limestone	0	11
Green clay	11	13
Red clay	13	45
Limestone rock	45	124

(Use a second sheet if needed)

10. Screen: Manufacturer's name Western Plastics
Type PVC Dia. 5"
Slot/gauze 3/32 Length 44'
Set between 80 ft. and 124 ft.
___ ft. and ___ ft.
Gravel pack? Yes Size range of material 1/16 to 3/8

11. Static water level: mo./day/yr.
80 ft. below land surface Date 11/10/75

12. Pumping level below land surfaces:
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 10 g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes X No Date

14. Well head completion:
__ Pitless adapter 18 Inches above grade

15. Well grouted? Yes
With: X Neat cement __ Bentonite __ Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination:
ft. 10' Direction North Type Corral
Well disinfected upon completion? X Yes __ No

17. Pump: X Not installed
Manufacturer's name
Model number HP Volts
Length of drop pipe ft. capacity g.p.m.
Type:
__ Submersible __ Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

T 12 — R 4 (E/W) Sec 20 SE NW SE 1/4 1/4 1/4

18. Elevation:

Topography:
X Hill
__ Slope
__ Upland
__ Valley

19. Remarks:

20. Water well contractor's certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Rader Drilling Co. 194
Business name License No.
Address Carlton, Kans. 67429
Signed Brent E Rader Date 12-5-75
Authorized representative

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5

MI-1023