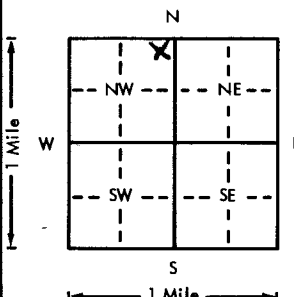
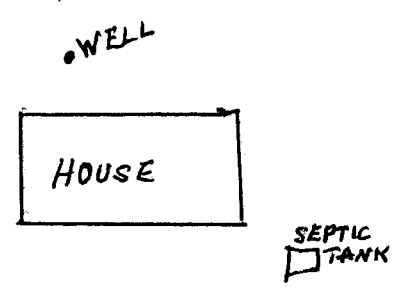


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Dickinson	Fraction NE 1/4 NE 1/4 NW 1/4	Section number 17	Township number 13	Range number 2																
X Distance and direction from nearest town or city: 1/2 mile west of Abilene Street address of well location if in city:			3. Owner of well: Charles Hartman R.R. or street: R.R. # 4 City, state, zip code: Abilene, Kansas 67410																		
4. Locate with "X" in section below: 		Sketch map: 		6. Bore hole dia. 8 in. Completion date _____ Well depth 4450 ft. 3/15/77																	
5. Type and color of material		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;">From</th> <th style="width:20%;">To</th> </tr> </thead> <tbody> <tr><td>Sand</td><td>0 1</td></tr> <tr><td>Clay</td><td>1 8</td></tr> <tr><td>Fine sand</td><td>8 25</td></tr> <tr><td>Clay</td><td>25 34</td></tr> <tr><td>Sand</td><td>34 41</td></tr> <tr><td>Lost circulation - rock</td><td>41 45</td></tr> <tr><td>Rock</td><td>45 50</td></tr> </tbody> </table>		From	To	Sand	0 1	Clay	1 8	Fine sand	8 25	Clay	25 34	Sand	34 41	Lost circulation - rock	41 45	Rock	45 50	7. Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
From	To																				
Sand	0 1																				
Clay	1 8																				
Fine sand	8 25																				
Clay	25 34																				
Sand	34 41																				
Lost circulation - rock	41 45																				
Rock	45 50																				
		8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		9. Casing: Material Dist Height: Above ground _____ Threaded _____ Welded gl Surface 18 in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. 5 in. to 50 ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. 0.258																	
		10. Screen: Manufacturer's name Western Plastics Type RMP Dia. 5 1/2 Slot/gauze 3/32 Length 8' Set between 42 ft. and 50 ft. _____ ft. and _____ ft. Gravel pack? Yes Size range of material 1/16 to 3/8		11. Static water level: _____ mo./day/yr. 30 ft. below land surface Date 3/15/77																	
		12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ 12 _____ g.p.m.		13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____																	
		14. Well head completion: <input type="checkbox"/> Pitless adapter _____ 18 _____ inches above grade		X Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.																	
		16. Nearest source of possible contamination: septic tank ft. 150 Direction SE Type septic tank Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other																	
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: (Use a second sheet if needed)		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, Kansas 67429 Signed Brant P. Rader Date 4-8-77 Authorized representative																	

13-20-17 NE NE NW
 T R S W E
 Sec

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

Form WWC-5