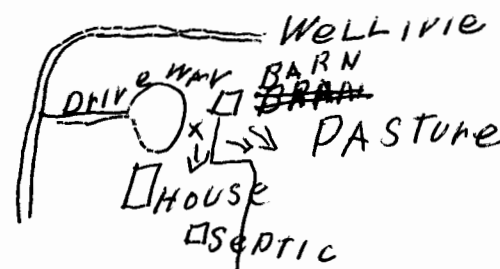


1. Location of well:	County <u>Franklin</u>	Fraction <u>NW 1/4 NE 1/4 SW 1/4</u>	Section number <u>29</u>	Township number <u>T 15 S R 21 E/W</u>	Range number
2. Distance and direction from nearest town or city: <u>1 mile west Wellsville</u> Street address of well location if in city:			3. Owner of well: <u>Arlit Watts</u> R.R. or street: <u>R.R.</u> City, state, zip code: <u>Wellsville, Kansas</u>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. _____ in. Completion date <u>11-21-76</u> Well depth <u>60</u> ft.	
<div style="text-align: center;">N NW NE SW SE S 1 Mile</div>				7. <input checked="" type="checkbox"/> Cable tool _____ Rotary _____ Driven _____ Dug _____ _____ Hollow rod _____ Jetted _____ Bored _____ Reverse rotary	
				8. Use: _____ Domestic _____ Public supply _____ Industry _____ _____ Irrigation _____ Air conditioning _____ Stock _____ _____ Lawn _____ Oil field water _____ Other _____	
5. Type and color of material		From To		Casing: Material _____ Height: Above _____ Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. _____	
				10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____	
				11. Static water level: _____ mo./day/yr. <u>10</u> ft. below land surface Date <u>11-21-76</u>	
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No _____ Date _____	
				14. Well head completion: _____ Pitless adapter _____ Inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From _____ ft. to _____ ft.	
				16. Nearest source of possible contamination: ft. _____ Direction <u>south</u> Type <u>septic</u> Well disinfected upon completion? Yes <input checked="" 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: ____ Submersible _____ Turbine ____ Jet _____ Reciprocating ____ Centrifugal _____ Other _____	
(Use a second sheet if needed)					
18. Elevation:	19. Remarks:			20. Water well contractor's certification:	
Topography: <input checked="" type="checkbox"/> Hill ____ Slope ____ Upland ____ Valley	This well was cased but I don't think it was worth it.....			This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Edgar Swank Drilling</u> 12-A Business name License No. Address: <u>RR 1 Ottawa, Kansas</u> Signed <u>Edgar Swank</u> 12-30 Authorized representative Date	