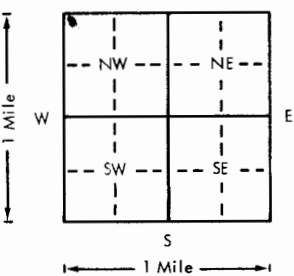


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

Page I

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 Morris	Fraction NW 1/4 NW 1/4 NW 1/4	Section number 33	Township number T 17 S R 9 E	Range number 9
2. Distance and direction from nearest town or city:		3 1/2 So, 3 W		3. Owner of well: M. J. Michaud		
Street address of well location if in city:		Dunlap Ks.		R.R. or street: KR-1		
City, state, zip code:		Dunlap Ks 66848				
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 10 in. Completion date 9/19-79 Well depth 130 ft.		
				7. <input checked="" type="checkbox"/> Cable tool <input 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		
5. Type and color of material		From		To		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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
CL W- Flint G Brn		0		2		9. Casing: Material <input type="checkbox"/> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Wall Thickness: <input type="checkbox"/> inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <input type="checkbox"/>
CL-Sh yellow		2		6		10. Screen: Manufacturer's name <input type="checkbox"/> Type <input type="checkbox"/> Dia. <input type="checkbox"/> Slot/gauze <input type="checkbox"/> Length <input type="checkbox"/> Set between <input type="checkbox"/> ft. and <input type="checkbox"/> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Grovel pack? <input type="checkbox"/> Size range of material <input type="checkbox"/>
Lime		6		9		11. Static water level: <input type="checkbox"/> mo./day/yr. 71' ft. below land surface Date 9/19/79
Sh yellow		9		15		12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.
Lime white		15		19		13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date 9/19/79
Shale Lime Lens. Li Brn		19		30		14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> inches above grade
Lime Dense		30		40		15. Well grouted? <input type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <input type="checkbox"/> ft. to <input type="checkbox"/> ft.
Lime Sh		40		42		16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No
Sh Dark Gray		42		45		17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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
Lime Sh Gray		45		57		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. MSNE Drilling 203 Business name <input type="checkbox"/> License No. <input type="checkbox"/> Address Cottonwood Falls Ks. Signed judne Date 9/19/79 Authorized representative
Sh Red.		57		60		
Sh w Lime Lens.		60		65		
Sh variegated. Boxwork P H2O 82'		65		84		
Sh Dark Dense		84		90		
CL Sh Black		90		102		
(Use a second sheet if needed)						
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		Bad H2O				

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

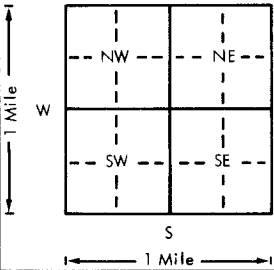
Form WWC-5

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

Page II

1. Location of well:		County Morris	Fraction NW 1/4 NW 1/4 NW 1/4	Section number 33	Township number T 17	Range number S R 9
2. Distance and direction from nearest town or city: 2 1/2 So 3W			3. Owner of well: M J Michael			
Street address of well location if in city: Dunklap.			R.R. or street: RR-1 Doyle p. 155. 66848			
City, state, zip code:						
4. Locate with "X" in section below:			Sketch map:			6. Bore hole dia. _____ in. Completion date _____
						Well depth _____ ft.
5. Type and color of material			From	To	7. _____ Cable tool _____ Rotary _____ Driven _____ Dug _____ Hollow rod _____ Jetted _____ Bored _____ Reverse rotary	
Sh Green			102	108	8. Use: _____ Domestic _____ Public supply _____ Industry _____ Irrigation _____ Air conditioning _____ Stock _____ Lawn _____ Oil field water _____ Other _____	
Top Neva.			108	111	9. Casing: Material _____ Height: Above or below _____ Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. _____	
Line on Sh. 50ET			111	115	10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____	
Sh Brown.			115	129	11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date _____	
Hard Gray Limestone T.D.			129	130	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.	
Bailed Down Hole. P & A					13. Water sample submitted: _____ mo./day/yr. _____ Yes _____ No Date _____	
Fill Cuttings to 90'					14. Well head completion: _____ Pitless adapter _____ Inches above grade	
Bentonite mix To 65' Run Plastic					15. Well grouted? _____ With: _____ Neat cement _____ Bentonite _____ Concrete Depth: From _____ ft. to _____ ft.	
Bucket Dump 3 Sacks Neat Cement					16. Nearest source of possible contamination: _____ ft. _____ Direction _____ Type _____ Well disinfected upon completion? _____ Yes _____ No	
Fill to 31' Dump 3 Sacks Neat Cement					17. Pump: _____ 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 _____	
Fill to 9' Dump 1 sack Neat Cement					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. M & N C Drilling 203 Business name _____ License No. _____ Address Cottonwood Falls KS Signed J C M... Date 9/6/12 Authorized representative	
Fill to Surface.						
(Use a second sheet if needed)						
18. Elevation:		19. Remarks:				
Topography: _____ Hill _____ Slope _____ Upland _____ Valley						

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

Form WWC-5