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

WATER WELL RECORD
KSA 82a-1201-1215

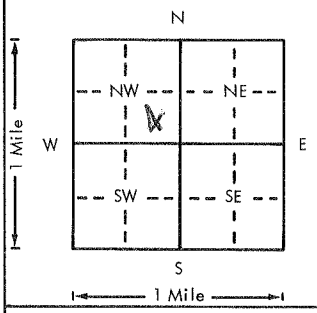
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Allen	X SE 1/4 ~~SE~~ 1/4 NW 1/4	7	T 24 S	R 21 E ~~W~~

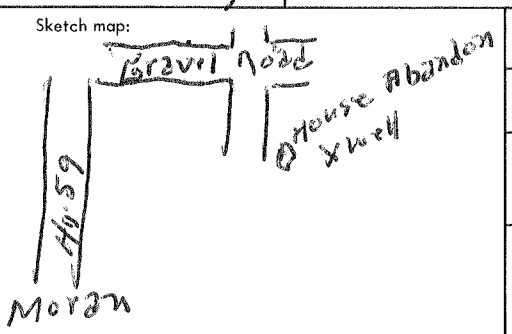
2. Distance and direction from nearest town or city: 4 Miles North-2 Miles East-1 Mile South Moran Ks
Street address of well location if in city:

3. Owner of well: Don Garrison
R.R. or street:
City, state, zip code: Moran Kansas

4. Locate with "X" in section below:



Sketch map:



6. Bore hole dia. 8 3/4 in. Completion date 12/1/77
Well depth 169 ft.

7. X Cable tool __ 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 Steel Height: Above or below
Threaded __ Welded __ Surface 12 in.
RMP __ PVC X Weight __ lbs./ft.
Dia. 6 in. to 169 ft. depth Wall Thickness: inches or
Dia. __ in. to __ ft. depth gage No.

5. Type and color of material	From	To
Shale	0	70
Lime	70	128
Shale	128	132
Lime "WTr"	132	143
Shale	143	145
Lime	145	161
Shale Black "WTR"	161	165
Lime	165	169

(Use a second sheet if needed)

10. Screen: Manufacturer's name Jetset
Type 100 Dia. 6"
Slot/gauze X Length 150
Set between 19 ft. and 169 ft.
__ ft. and __ ft.
Gravel pack? X Size range of material 3/4

11. Static water level: mo./day/yr.
20 ft. below land surface Date 12/1/77

12. Pumping level below land surfaces:
__ ft. after 1 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 X No Date 12/1/77

14. Well head completion:
__ Pitless adapter 12" Inches above grade

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

16. Nearest source of possible contamination:
ft. 100 Direction E Type Feedlot
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

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.
Business name Eureka Well Service License No. 296
Address Eureka Kans
Signed Tim Cashlock Date 1-9-78
Authorized representative

T 24 R 21 E Sec 7 1/4 SE 1/4 SE 1/4 NW

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

Form WWC-5

MI-1023