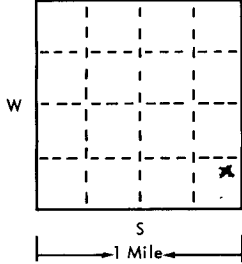
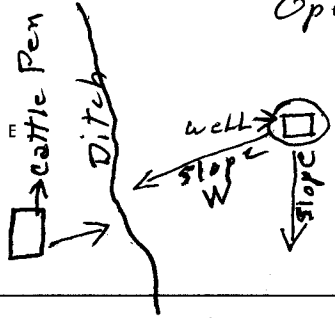


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

1 Location of well:	County <b>Cowley</b>	Township name <b>Rock</b>	Fraction <b>NE 1/4 SE 1/4</b>	Section number <b>36</b>	Town number <b>T30S</b>	Range number <b>R4E</b>
Distance and direction from nearest town or city: <b>1/2 mile north, 1/2 mile west, 2 miles north of Floral, Kansas</b>				3 Owner of well: <b>Steve Hamlin</b> Address: <b>Route 1 Winfield, Kans. 67156</b>		
Locate with "X" in section below: N 		Sketch map: <b>Open Pasture</b> 		4 Well depth: <b>100</b> ft. Date of completion <b>11-5-75</b> Well diameter <b>11</b> in.		
2 Type and color of material		From		To		5 <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
		Top Soil		0 5		6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>
		White Lime, shale		5 35		7 Casing: Material <b>#200 Plastic</b> Height: above/below <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Surface <b>24</b> in. Diam. _____ Weight <b>#200</b> lbs./ft. <b>6</b> in. to <b>100</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth
		Blue Shale		35 80		8 Screen: <b>Casing Perforated Bottom 10 ft.</b> Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between <b>10</b> ft. and <b>100</b> ft. _____ Fittings: _____ Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>7/8"</b>
		White Lime		80 100		9 Static water level: <b>11'5"</b> ft. below land surface Date <b>11-5-75</b>
				10 Pumping level below land surfaces: <b>none</b> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>2</b> g.p.m.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				12 Well head completion: <b>NA</b> <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From <b>0</b> ft. to <b>10</b> ft.		
				14 Nearest source of possible contamination: ft. <b>250</b> Direction <b>WEST</b> Type <b>Ditch</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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		
16 Remarks: elevation <b>Location of well is: 300 FT west of East Section Line + 978 FT. north of South Section Line.</b> Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley <b>Fresh water vein at 30 ft,</b>				17 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. <b>Ronal Heffron Drilling #112</b> Business name _____ License No. _____ Address <b>Route 3 Winfield, Kans. 67156</b> Signed <b>Ronal Heffron</b> Date <b>11-28-75</b> Authorized representative		

30 4E 36 NE SE