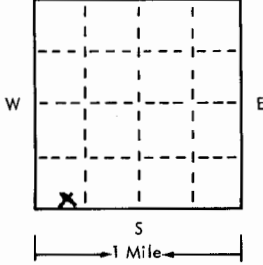


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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

Location of well: <input checked="" type="checkbox"/>	County <b>Barton</b>	Township name <b>Wheatland</b>	Fraction <b>SE SWSW</b> <del>SW</del>	Section number <del>13</del> <b>13</b>	Town number <del>16</del> <b>16</b>	Range number <del>14</del> <b>14</b>																														
Distance and direction from nearest town or city: <b>8 N + 5 W</b> Street address of well location if in city: <b>1-N + 1/2 W of Harrison, KS</b>			3 Owner of well: <b>Steve Reif</b> Address: <b>Claflin Kansas 67525</b>																																	
2 Locate with "X" in section below: 			4 Well depth: <b>210</b> ft. Date of completion: <b>5/22/77</b> Well diameter: <b>5 1/2</b> in. <b>MHC</b>			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																														
Type and color of material <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;"></th> <th style="width:5%;">From</th> <th style="width:15%;">To</th> </tr> </thead> <tbody> <tr> <td>Surface</td> <td>0</td> <td>3</td> </tr> <tr> <td>Yellow clay &amp; rock</td> <td>3</td> <td>32</td> </tr> <tr> <td>Shale blue</td> <td>32</td> <td>148</td> </tr> <tr> <td>" brown</td> <td>148</td> <td>158</td> </tr> <tr> <td>" light, sandy hard shells 1 gal in 15 min.</td> <td>158</td> <td>191</td> </tr> <tr> <td>muddy sand rock (water) 2 1/2 gal a min</td> <td>191</td> <td>196</td> </tr> <tr> <td>shale light gray</td> <td>196</td> <td>202</td> </tr> <tr> <td>red bed</td> <td>202</td> <td>210</td> </tr> <tr> <td colspan="3" style="text-align:center;">(use a second sheet if needed)</td> </tr> </tbody> </table>				From	To	Surface	0	3	Yellow clay & rock	3	32	Shale blue	32	148	" brown	148	158	" light, sandy hard shells 1 gal in 15 min.	158	191	muddy sand rock (water) 2 1/2 gal a min	191	196	shale light gray	196	202	red bed	202	210	(use a second sheet if needed)			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 checked="" type="checkbox"/> <b>Stockwell MHC</b>			7 Casing: Material <b>PVC</b> Height: <b>above</b> /below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>18</b> in. Diam. <b>5</b> in. to <b>210</b> ft. depth! Drive shoe? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth!
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8 Screen: Manufacturer _____ Type <b>PVC</b> Dia. <b>5 1/2</b> Slot/gauze <b>drilled</b> Length <b>5 ft.</b> Set between <b>191</b> ft. and <b>196</b> ft. _____ Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>1/4</b>			9 Static water level: <b>160</b> ft. below land surface Date <b>5-22-77</b>																																	
10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping <b>2 1/2</b> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>2 1/2</b> g.p.m.			11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____																																	
12 Well head completion: <input type="checkbox"/> Pitless adapter <b>18</b> inches above grade			13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite _____ Depth: From <b>0</b> ft. to <b>45</b> ft.																																	
14 Nearest source of possible contamination: ft. <b>1/2 mi</b> Direction <b>SW</b> Type <b>Farmyard</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			15 Pump: <input type="checkbox"/> Not installed Manufacturer's name _____ Model number <b>206</b> HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. Type: <b>Windmill</b> <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  Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			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>Jezeq water well Drilling</b> Business name _____ License No. <b>191</b> Address <b>Holyrood, Kan.</b> Signed <b>Jezeq</b> Date <b>6-22-77</b> Authorized representative																																	

16 14013 1 SE SWSW