WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: Barton | Fraction: C ¼ NE ¼ SE ¼ | Section Number: 15 | Township Number: T 18 S | Range Number: R 11W E/W

Distance and direction from nearest town or city? 1 E, 2½ S of Claflin, Kansas

Street address of well if located within city?

2 WATER WELL OWNER: Woodman & Iannitti Oil Company

RR#, St. Address, Box # : 1008 Douglas Bldg., 104 S. Broadway

City, State, ZIP Code : Wichita, Kansas 67202

Board of Agriculture, Division of Water Resources Application Number: Unknown

3 DEPTH OF COMPLETED WELL 120 ft. Bore Hole Diameter 8 in. to 120 ft., and ..... in. to ..... ft.

Well Water to be used as: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below)

Well's static water level 42 ft. below land surface measured on 4 month 28 day 1981 year

Pump Test Data: Well water was ..... ft. after ..... hours pumping ..... gpm

Est. Yield 60 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)

Casing Joints: Glued Clamped Welded Threaded

Blank casing dia 5 in. to 100 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 12 in., weight 2.8 lbs./ft. Wall thickness or gauge No Sch. 40

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)

Screen or Perforation Openings Are: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)

Screen-Perforation Dia 5 in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in to ..... ft.

Screen-Perforated Intervals: From 100 ft. to 120 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

Gravel Pack Intervals: From 10 ft. to 120 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....

Grouted Intervals: From 0 ft. to 10 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)

Direction from well East How many feet 60 ? Water Well Disinfected? Yes No

Was a chemical/bacteriological sample submitted to Department? Yes No If yes, date sample was submitted ..... month ..... day ..... year: Pump Installed? Yes No

If Yes: Pump Manufacturer's name ..... Model No. ..... HP ..... Volts .....

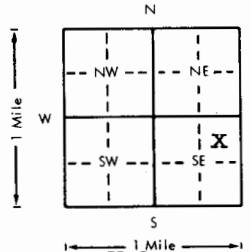
Depth of Pump Intake ..... ft. Pumps Capacity rated at ..... gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 4 month 28 day 1981 year, and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186

This Water Well Record was completed on May month 19 day 1981 year under the business name of Kellys Water Well Service by (signature) Kelly Price

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



ELEVATION: Unknown

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	60	Clay			
60	120	Sand rock			

Depth(s) Groundwater Encountered 1. 42 ft. 2. ..... ft. 3. ..... ft. 4. ..... ft. (Use a second sheet if needed)

INSTRUCTIONS: Use typewriter or ball point pen, *please press firmly* and *PRINT* clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 18 R 11 E/W SEC. 15 C ¼ NE ¼ SE ¼