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

WATER WELL RECORD
KSA 82a-1201-1215

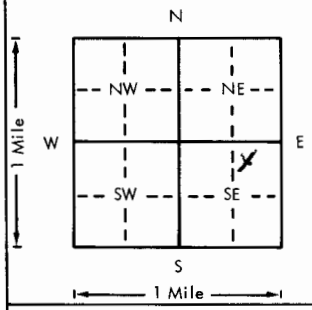
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

| 1. Location of well: | County Rice ~~Barton~~ | Fraction NW 1/4 NE 1/4 SE 1/4 | Section number 17 | Township number T 19 S | Range number R 10 E (W) |
|---|---|---|---|---|---|

2. Distance and direction from nearest town or city: 7-E 3 3/4, N. west side from Ellinwood, Ks.
Street address of well location if in city:

3. Owner of well: G. L. Robinson
R.R. or street: Box 176
City, state, zip code: Ellinwood, Ks. 67526

4. Locate with "X" in section below:




Sketch map:

6. Bore hole dia. 11 in. Completion date 10-14-78
Well depth 55 ft.

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water X Other Pond

9. Casing: Material PVC Height: Above or ~~below~~
Threaded ___ Welded — Surface 18 in.
RMP ___ PVC — Weight ___ lbs./ft.
Dia 6 in. to 55 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. 280

| 5. Type and color of material | From | To |
|---|---|---|
| top soil | 0 | 3 |
| clay | 3 | 16 |
| sand & gravel | 16 | 55 |
| clay | 55 | |

(Use a second sheet if needed)

10. Screen: Manufacturer's name Certainteed
Type PVC Dia.
Slot/gauze 116 Length 20
Set between 55 ft. and 35 ft.
___ ft. and ___ ft.
Gravel pack? X Size range of material 5 3/4 3/8

11. Static water level: mo./day/yr.
16 ft. below land surface Date 10-19-78

12. Pumping level below land surfaces:
16 ft. after 1 hrs. pumping 100 g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 200 g.p.m.

13. Water sample submitted: mo./day/yr.
X Yes ___ No Date 10-19-78

14. Well head completion:
___ Pitless adapter ___ Inches above grade

15. Well grouted? X
With: X Neat cement ___ Bentonite ___ Concrete
Depth: From 0 ft. to 12 ft.

16. Nearest source of possible contamination:
ft. 125 Direction SW Type oil well
Well disinfected upon completion? ___ Yes ___ No

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

18. Elevation:

Topography:
___ 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.
Rosencrantz-Bemis 134
Business name License No.
Address Great Bend, Ks. 67530
Signed Sandy Rieger Date 11-18-78
Authorized representative

T 19 R 10 E (W) Sec 17 1/4 NW 1/4 NE 1/4 SE 1/4

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

Form WWC-5