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

WATER WELL RECORD
KSA 82a-1201-1215

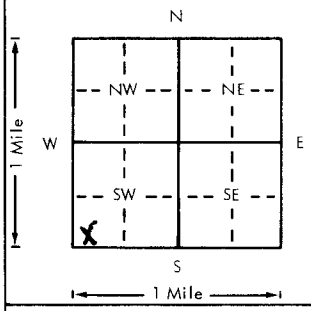
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Barton	SW 1/4 SW 1/4 SW 1/4	32	T 19 S	R 11 (E) W

2. Distance and direction from nearest town or city: 1/4 E
Street address of well location if in city: Ellinwood, Ks

3. Owner of well: Allen Drlg Co
R.R. or street: Box 1389
City, state, zip code: Great Bend, KS

4. Locate with "X" in section below: Sketch map:



6. Bore hole dia. 8 in. Completion date 7-18-77
Well depth 48 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 X Oil field water __ Other

9. Casing: Material ____ Height: Above ~~or below~~
Threaded ____ Welded ____ Surface 12 in.
RMP ____ PVC X Weight ____ lbs./ft.
Dia. 4 in. to 48 ft. depth Wall Thickness: inches or
Dia. ____ in. to ____ ft. depth gage No. Sch 40

5. Type and color of material	From	To
Top Soil - Clay	6	12
Sand	12	23
Sand - Gravel	23	48

(Use a second sheet if needed)

10. Screen: Manufacturer's name API
Type PVC Dia. 4"
Slot/gauze 1116" Length 20'
Set between 28 ft. and 48 ft.
____ ft. and ____ ft.
Gravel pack? X Size range of material 1/8-3/4"

11. Static water level: mo./day/yr.
13 ft. below land surface Date 7-18-77

12. Pumping level below land surfaces:
____ ft. after ____ hrs. pumping ____ g.p.m.
____ ft. after ____ hrs. pumping ____ g.p.m.
Estimated maximum yield 50 g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes X No Date ____

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

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

16. Nearest source of possible contamination: Oil Test
ft. 60 Direction SE Type
Well disinfected upon completion? __ Yes X 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:
__ Hill
__ Slope
__ Upland
X 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. 186
Kelly's Water Well Ser
Business name License No.
Address R 2 Great Bend Ks
Signed Kelly Price Date 8-11-78
Authorized representative

T 19 R 11 (E) W Sec 32 1/4 SE SE SE

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

Form WWC-5

MI-1023