

| 1. Location of well:                                                                                                                                                                                                                                                                                                                                                                                                                       | County <b>Barston</b> | Fraction <b>1/4 NW 1/4 NE 1/4</b> | Section number <b>28</b>                                                                                                                                                                                                                                                                                                                                                                                                        | Township number <b>T 19 S</b> | Range number <b>R 13 E/W</b> |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------------|-------------|----------------------|--------------|-------------|--------------|----------------------|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| 2. Distance and direction from nearest town or city:<br>Street address of well location if in city: <b>2427 Shawnee Great Bend, KS</b>                                                                                                                                                                                                                                                                                                     |                       |                                   | 3. Owner of well: <b>Lester Nuss</b><br>R.R. or street: <b>2427 Shawnee Great Bend, KS</b><br>City, state, zip code:                                                                                                                                                                                                                                                                                                            |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
| 4. Locate with "X" in section below:<br>Sketch map:<br><div style="text-align: center;"> </div>                                                                                                                                                                                                                                                                                                                                            |                       |                                   | 6. Bore hole dia. <b>7</b> in. Completion date <b>4-21-76</b><br>Well depth <b>72</b> ft.                                                                                                                                                                                                                                                                                                                                       |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
| 5. Type and color of material                                                                                                                                                                                                                                                                                                                                                                                                              |                       |                                   | 7. Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary                                                                                                                                                             |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                                   | 8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other                                                                          |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;">From</th> <th style="width:50%;">To</th> </tr> </thead> <tbody> <tr> <td><b>Topsoil - Clay</b></td> <td><b>0 11</b></td> </tr> <tr> <td><b>Sand - Gravel</b></td> <td><b>11 32</b></td> </tr> <tr> <td><b>Clay</b></td> <td><b>32 48</b></td> </tr> <tr> <td><b>Sand - Gravel</b></td> <td><b>48 72</b></td> </tr> </tbody> </table> |                       |                                   | From                                                                                                                                                                                                                                                                                                                                                                                                                            | To                            | <b>Topsoil - Clay</b>        | <b>0 11</b> | <b>Sand - Gravel</b> | <b>11 32</b> | <b>Clay</b> | <b>32 48</b> | <b>Sand - Gravel</b> | <b>48 72</b> | 9. Casing: Material <input type="checkbox"/> Height: <b>Above</b> or below<br>Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in.<br>RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft.<br>Dia. <b>4</b> in. to <b>72</b> ft. depth Wall Thickness: inches or<br>Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>200H</b> |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                                   | From                                                                                                                                                                                                                                                                                                                                                                                                                            | To                            |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
| <b>Topsoil - Clay</b>                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>0 11</b>           |                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                 |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
| <b>Sand - Gravel</b>                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>11 32</b>          |                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                 |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
| <b>Clay</b>                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>32 48</b>          |                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                 |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
| <b>Sand - Gravel</b>                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>48 72</b>          |                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                 |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                                   | 10. Screen: Manufacturer's name <b>MPI</b><br>Type <b>PVC</b> Dia. <b>4"</b><br>Slot/gauze <b>1/8"</b> Length <b>20'</b><br>Set between <b>52</b> ft. and <b>72</b> ft.<br>ft. and <input type="checkbox"/> ft.<br>Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8 - 3/4"</b>                                                                                                                    |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                                   | 11. Static water level: <input type="checkbox"/> mo./day/yr.<br><b>15</b> ft. below land surface Date <b>4-21-76</b>                                                                                                                                                                                                                                                                                                            |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                                   | 12. Pumping level below land surfaces:<br><input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m.<br><input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m.<br>Estimated maximum yield <b>100</b> g.p.m.                                                                                                                     |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                                   | 13. Water sample submitted: <input type="checkbox"/> mo./day/yr.<br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <input type="checkbox"/>                                                                                                                                                                                                                                                           |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                                   | 14. Well head completion:<br><input type="checkbox"/> Pitless adapter <b>12</b> Inches above grade                                                                                                                                                                                                                                                                                                                              |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                                   | 15. Well grouted? <input checked="" type="checkbox"/><br>With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete<br>Depth: From <b>0</b> ft. to <b>10</b> ft.                                                                                                                                                                                                |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                                   | 16. Nearest source of possible contamination:<br>ft. <b>70</b> Direction <b>S</b> Type <b>sewer</b><br>Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                    |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                                   | 17. Pump:<br>Manufacturer's name <b>Kouids</b> Not installed<br>Model number <b>25EL</b> HP <b>1</b> Volts <b>230</b><br>Length of drop pipe <b>70</b> ft. capacity <b>25</b> g.p.m.<br>Type:<br><input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
| 18. Elevation:                                                                                                                                                                                                                                                                                                                                                                                                                             |                       |                                   | 19. Remarks:<br><b>1544</b>                                                                                                                                                                                                                                                                                                                                                                                                     |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |
| 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.<br><b>Kelly's Water Well Serv.</b> 186<br>Business name License No.<br>Address <b>R2 Great Bend, KS</b><br>Signed <b>Kelly Davis</b> Date <b>4-21-76</b><br>Authorized representative                                                                                            |                       |                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                 |                               |                              |             |                      |              |             |              |                      |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |