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

WATER WELL RECORD
KSA 82a-1201-1215

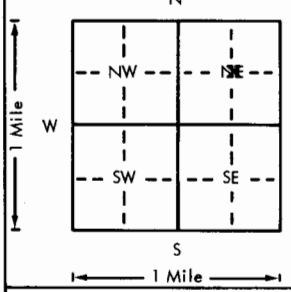
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Barton	1/4 1/4 CNE 1/4	25	T 20 S	R 13 (E) (W)

2. Distance and direction from nearest town or city:
8 miles Southeast of Great Bend, KS
Street address of well location if in city:

3. Owner of well: Stan [redacted] Christiansen
R.R. or street: Route 3
City, state, zip code: Hudson, KS 67545

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



6. Bore hole dia. 24 in. Completion date 3-8-77
Well depth 91 ft.

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

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

9. Casing: Material steel Height: (Above) or below
Threaded ___ Welded X Surface 12 in.
RMP ___ PVC ___ Weight 30.3 lbs./ft.
Dia 16 in. to 41 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. 7 ga.

5. Type and color of material	From	To
top soil & clay	0	5
brown clay to 15-19, sand & gravel	5	19
clay	19	26
sand & gravel	26	54
clay	54	61
sand & gravel	61	91

(Use a second sheet if needed)

10. Screen: Manufacturer's name Brown
Type Double-slot Dia. 16"
(Slot) gauze 1/8 Length 50'
Set between 41 ft. and 91 ft.
___ ft. and ___ ft.
Gravel pack? yes Size range of material 3/8-200

11. Static water level: mo./day/yr.
13'10" below land surface Date 2-11-77

12. Pumping level below land surfaces: N/C
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield ___ 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? yes
With (X) Neat cement ___ Bentonite ___ Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination: Field
ft. ___ Direction ___ Type ___
Well disinfected upon completion? ___ Yes X No

17. Pump: ___ Not installed
Manufacturer's name Peerless Pump
Model number 12MB-4 HP 60 Volts 460
Length of drop pipe 70 ft. capacity 900 g.p.m.
Type:
___ Submersible X 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.
Clarke Well & EQ., Inc. 185
Business name License No.
Address Great Bend, KS 67530
Signed [signature] Date 3-11-77
Authorized representative

T 20 R 13 (E) (W) Sec 25 — 1/4 1/4 1/4 CNE

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

Form WWC-5