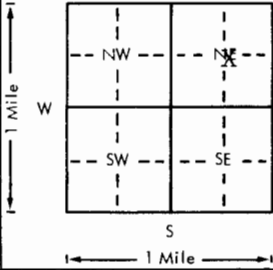


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <b>Stafford</b>	Fraction 1/4 1/4 NE 1/4	Center of	Section number <b>31</b>	Township number T <b>21</b> S R <b>14</b>	Range number <b>EW</b>	
2. Distance and direction from nearest town or city: <b>5 1/2 miles NW of Seward, KS</b> Street address of well location if in city:			3. Owner of well: <b>Brent Clarke</b> R.R. or street: <b>Route 1</b> City, state, zip code: <b>Great Bend, KS 67530</b>				
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		6. Bore hole dia. <u>24</u> in. Completion date <u>1-19-79</u> Well depth <u>128</u> ft. Pump Set <u>6-18-79</u>			
5. Type and color of material		From To		7. Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input checked="" type="checkbox"/> Reverse rotary			
				8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other			
Top Soil		0 3		9. Casing: Material <u>steel</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>30.3</u> lbs./ft. Dia. <u>16</u> in. to <u>   </u> ft. depth Wall Thickness: inches or Dia. <u>   </u> in. to <u>   </u> ft. depth Gauge No. <u>7 &amp; GA.</u>			
				10. Screen: Manufacturer's name <u>Doerr</u> Type <u>Double-slot</u> Dia. <u>16"</u> <u>SEE LEFT</u> Slot/gauze <u>1/8"</u> Length <u>68'</u> Set between <u>SEE LEFT</u> ft. and <u>   </u> ft. <u>   </u> ft. and <u>   </u> ft. Gravel pack? <u>Yes</u> Size range of material <u>3/8-200</u>			
Sandy Clay & Sand		3 27		11. Static water level: <u>N/C</u> mo./day/yr. <u>N/C</u> ft. below land surface Date <u>   </u>			
Sand & Gravel & Thin Clay Streak		27 60		12. Pumping level below land surfaces: <input checked="" type="checkbox"/> N/C <u>   </u> ft. after <u>   </u> hrs. pumping <u>   </u> g.p.m. <u>   </u> ft. after <u>   </u> hrs. pumping <u>   </u> g.p.m. Estimated maximum yield <u>   </u> g.p.m.			
Gray clay		60 63		13. Water sample submitted: <u>   </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u>   </u>			
Sand & Gravel		63 79		14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade			
Gray Clay		79 87		15. Well grouted? <u>Yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.			
Sand & Gravel		87 94		16. Nearest source of possible contamination: <u>FIELD</u> ft. <u>   </u> Direction <u>   </u> Type <u>FIELD</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Gray & Brown Clay		94 110		17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Peerless Pump Co.</u> Model number <u>12LB-3</u> HP <u>60</u> Volts <u>   </u> Length of drop pipe <u>50</u> ft. capacity <u>800</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other			
Sand & Gravel		110 128		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. <b>Clarke Well &amp; Eq., Inc. 185</b> Business name <u>Great Bend, KS 67530</u> License No. <u>   </u> Address <u>   </u> Date <u>6-19-79</u> Signed <u>[Signature]</u> Authorized representative			
***** CASING & SCREEN RECORD: *****							
Plain Casing		0 40					
Screen		40 80					
Plain Casing		80 88					
Screen		88 96					
Plain Casing		96 108					
Screen (Use a second sheet if needed)		108 128					
18. Elevation:		19. Remarks:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley							

21 14 31 1/4 1/4 1/4 1/4

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

Form WWC-5