ROBERT BELL #2 WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: PAWNEE | Fraction: C E½ NE¼ NE¼ | Section Number: 34 | Township Number: T 21 S | Range Number: R 16 E (W)

Distance and direction from nearest town or city? LARNED 1E SOUTHSIDE | Street address of well if located within city?

2 WATER WELL OWNER: RAINS & WILLIAMSON OIL CO. INC.
RR#, St. Address, Box # : 435 PAGE COURT 220 W. DOUGLAS
City, State, ZIP Code : WICHITA, KS 67202
Board of Agriculture, Division of Water Resources Application Number: T81-363

3 DEPTH OF COMPLETED WELL 50 ft. Bore Hole Diameter 6 3/4 in. to 50 ft., and ..... in. to ..... ft.

Well Water to be used as: 1 Domestic 3 Feedlot 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below) .....

2 Irrigation 4 Industrial

Well's static water level 10 ft. below land surface measured on MAY month 27 day 1981 year

Pump Test Data NONE : Well water was ..... ft. after ..... hours pumping ..... gpm

Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) .....

Casing Joints: Glued XY Clamped ..... Welded ..... Threaded .....

Blank casing dia 4½ in. to 30 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 12 in., weight 1.832 lbs./ft. Wall thickness or gauge No. 190

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) ..... 12 None used (open hole)

Screen or Perforation Openings Are: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) ..... 11 None (open hole)

Screen-Perforation Dia 4 1/2 in. to 50 ft., Dia ..... in. to ..... ft., Dia ..... in to ..... ft.

Screen-Perforated Intervals: From 30 ft. to 50 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

Gravel Pack Intervals: From 20 ft. to 50 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....

Grouted Intervals: From 0 ft. to 10 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination: NONE

1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) .....

Direction from well ..... How many feet ..... ? Water Well Disinfected? Yes ..... No L

Was a chemical/bacteriological sample submitted to Department? Yes ..... No L If yes, date sample was submitted ..... month ..... day ..... year: Pump Installed? Yes ..... No —

If Yes: Pump Manufacturer's name ..... Model No. ..... HP ..... Volts .....

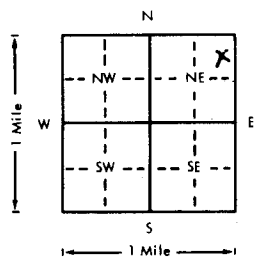
Depth of Pump Intake ..... ft. Pumps Capacity rated at ..... gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on MAY month 27 day 1981 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 389

This Water Well Record was completed on JUNE month 4 day 1981 year under the business name of REISER WATER WELL SERVICE INC. by (signature) Rudolph J Reiser

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



ELEVATION:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	SOIL			
4	10	SAND			
10	45	GRAVEL			
45	50	CLAY			

Depth(s) Groundwater Encountered 1 ..... ft. 2 ..... ft. 3 ..... ft. 4 ..... ft. (Use a second sheet if needed)

INSTRUCTIONS: Use typewriter or ball point pen, *please press firmly* and *PRINT* clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 21 R 16 E (W) SEC. 34 E ¼ NE ¼ NE ¼