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

WATER WELL RECORD
KSA 82a-1201-1215

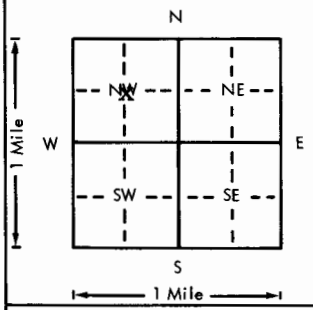
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Rice	1/4 1/4 CNW 1/4	35	T 21 S	R 9 E (W)

2. Distance and direction from nearest town or city: 4½ Miles Southwest of Sterling, KS
Street address of well location if in city:

3. Owner of well: Glenn McMurphy
R.R. or street: Rural Route
City, state, zip code: Sterling, KS 67579'

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



6. Bore hole dia. 24 in. Completion date 3-24-77
Well depth 64 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 24 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	0	3
Brown & gray clay	3	16
Sand & gravel	16	32
Brown & gray clay	32	38
Sand & gravel	38	41
Brown clay	41	46
Sand & gravel	46	63
Red shale	63	64

(Use a second sheet if needed)

10. Screen: Manufacturer's name Doerr
Type Double-slot Dia. 16"
Slot/gauze 1/8 Length 40'
Set between 24 ft. and 64 ft.
___ ft. and ___ ft.
Gravel pack? yes Size range of material 3/8-200

11. Static water level: mo./day/yr.
11 ft. below land surface Date 3-1-77

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 12LB-2 HP 60 Volts --
Length of drop pipe 50 ft. capacity 900 g.p.m.
Type:
___ Submersible X Turbine
___ Jet ___ Reciprocating
___ Centrifugal ___ Other

T 21 R 9 E Sec 35 1/4 1/4 1/4 CNW

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 & Equip., Inc. 185
Business name License No.
Address Great Bend, KS 67530
Signed O.W. Clarke Date 3-25-77
Authorized representative

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

Form WWC-5

MI-1023