WATER WELL RECORD KSA 82a-1201-1215

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

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1. Location of well:	County	Fraction		Section	number	Township number	Ran	ge number		
T. LOCATION OF WEIL.	Kearny]1/4	1)	+	т 22	S. R	3 8	XEXW	
2. Distance and dire 10 mi W; 12 Street address of well	Drilling & Supply, Inc. N. Hwy 50- RR#1 arden City, Ks. 678h6									
The Local Court of Section Bolow.										
NW NE						7Cable tool X_RotaryDrivenDugHollow rodJettedBoredReverse rotary				
						X Irrigation Air conditioning Stock Lawn Oil field water Other				
						Threaded Welded X Surface 12 in. RMP PVC Weight 36.86 lbs./ft.				
5. Type and color of material From					То	Diain. to ft. depth wait inckness: Inches or Diain. to ft. depth gage No. 219				
				***************************************		10. Screen: Manufacturer	s name _			
Clay				0	60	Type Millslot Dia. 16"				
Sand				60	180	Set between 175 ft. and 231 ft.				
Sand, clay streaks 180				200	ft. and ft. Gravel pack? Yesize range of material 2XX					
Sand			6	200	220	11 Static water level:mo./day/yr.				
Clay			(220	225	12. Pumping level below land surfaces:				
Shale				225_	231	ft. after hrs. pumping g.p.m.				
				·		13. Water sample submitted	l:	m		
								_ Inches abov	e grade	
				******		15. Well grouted? Yes With: Neat cement Bentonite X Concrete				
						ft Direction Type				
MEMORY AND PARTY HAVE AND THE PARTY OF THE PARTY HAVE AND AND THE PARTY HAVE AND THE PART	CONSISTENCE STATE OF THE PROPERTY OF THE PRO	et som en				17. Pump:		Not installed	The state of the s	
7						Model number 5S10L2	<u>2</u> HP.	agton 20 v	1014160	
**************************************	No.									
						Submersible				
	(Use a second sh	eet if needed)			**************************************				- 1	
18. Elevation: 19. Remarks:						This well was drilled under my jurisdiction and this report				
Topography:	High Plains I				rilling & Supply, Inc. 136 A					
Slope X_ Upland					Candon Ottor Va					
Valley						Signed Authorized representative				

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

Form WWC-5