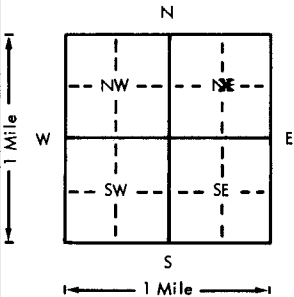


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Pawnee	Fraction 1/4 1/4 CNE 1/4	Section number 24	Township number T 23 S	Range number R 16 E/W
2. Distance and direction from nearest town or city: 12 1/2 miles Southeast of Larned, KS Street address of well location if in city:				3. Owner of well: Kansas Irrigated Properties (Investment) R.R. or street: c/o Kenneth Maechtlen City, state, zip code: Box 2281 Wichita, KS 67201		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 24 in. Completion date 8-3-76 Well depth 76 ft.		
				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		
5. Type and color of material				From	To	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 steel Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight 30.3 lbs./ft. Dia. 16 in. to 36 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 7 ga.
sand clay & sand				3	19	10. Screen: Manufacturer's name Doerr Type Double-slot Dia. 16" Slot/gauze 1/8" Length 40' Set between 36 ft. and 76 ft. ft. and <input type="checkbox"/> ft. Gravel pack? yes Size range of material 3/8-200
brown clay & broken lime streaks				19	26	11. Static water level: <input type="checkbox"/> ft. below land surface Date 7-30-76
sand & gravel & clay streak at 57'				26	70	12. Pumping level below land surfaces: N/C <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.
Dakota clay				70	76	13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>
						14. Well head completion: <input type="checkbox"/> Pitless adapter 12 inches above grade
						15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.
						X NONE KNOWN
						16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
						17. Pump: Manufacturer's name FMC Corp./Peerless Not installed Model number 12LB-3 HP 80 Volts -- Length of drop pipe 60 ft. capacity 900 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
(Use a second sheet if needed)						
18. Elevation:		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 8-4-76 Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5