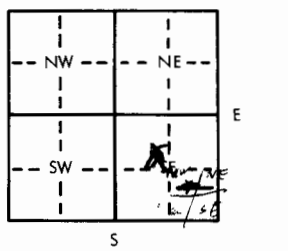


1. Location of well: County <u>HARVEY</u> Fraction <u>SE 1/4 NW 1/4 SE 1/4</u> Section number <u>17</u> Township number <u>T-23-S</u> Range number <u>R-2-E</u>			
2. Distance and direction from nearest town or city: <u>3W-4N of Halstead</u>		3. Owner of well: <u>Clarence Schrier</u> R.R. or street: <u>RRI</u> City, state, zip code: <u>Halstead Ks. 67056</u>	
4. Locate with "X" in section below: 		Sketch map:	
5. Type and color of material		From	To
<u>Top soil</u>		<u>0</u>	<u>5</u>
<u>Fine red sand</u>		<u>5</u>	<u>10</u>
<u>Buff clay</u>		<u>10</u>	<u>25</u>
<u>Grey clay</u>		<u>25</u>	<u>40</u>
<u>Brown clay</u>		<u>40</u>	<u>50</u>
<u>Fine grey sand</u>		<u>50</u>	<u>60</u>
<u>Green clay</u>		<u>60</u>	<u>70</u>
<u>Fine brown sand</u>		<u>70</u>	<u>80</u>
<u>Green + grey clay</u>		<u>80</u>	<u>95</u>
<u>Fine + med. brown sand</u>		<u>95</u>	<u>105</u>
6. Bore hole dia. <u>4</u> in. Completion date <u>1-3-78</u> Well depth <u>105</u> ft.			
7. <input checked="" type="checkbox"/> Cable tool <input checked="" 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 type="checkbox"/> Reverse rotary			
8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input 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			
9. Casing: Material <input type="checkbox"/> Height Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>92</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>1 1/2</u> lbs./ft. Dia. <u>4</u> in. to <u>105</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gage No. <u>14</u>			
10. Screen: Manufacturer's name <u>Peerless Plastics</u> Type <u>PVC</u> Dia. <u>4"</u> Slot/gauze <u>1/32"</u> Length <u>15'</u> Set between <u>85</u> ft. and <u>100</u> ft. Gravel pack? <u>yes</u> Size range of material <u>1/4</u>			
11. Static water level: <u>22</u> ft. below land surface Date <u>1-3-78</u> mo./day/yr.			
12. Pumping level below land surfaces: <u>25</u> ft. after <u>3</u> hrs. pumping <u>15</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>20</u> g.p.m.			
13. Water sample submitted: <u> </u> mo./day/yr. <u> </u> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u> </u>			
14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u> </u> inches above grade			
15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>4</u> ft. to <u>14</u> ft.			
16. Nearest source of possible contamination: ft. <u>1000</u> Direction <u>North</u> Type <u>cattle</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other			
18. Elevation:		19. Remarks:	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		(Use a second sheet if needed)	
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. <u>Peterson Irrigation</u> License No. <u>138A</u> Business name <u>Box 150 Lindsborg Ks.</u> Address <u>Mike Chambers</u> Date <u>1-11-</u> Signed <u> </u> Authorized representative			