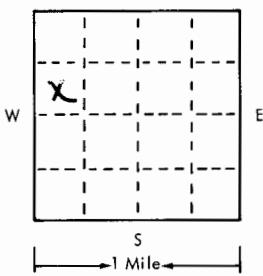


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County <u>Stafford</u>	Township name	Fraction <u>SW NW</u>	Section number <u>13</u>	Town number <u>24 S</u>	Range number <u>15 W</u>
Distance and direction from nearest town or city: <u>2 E. 1/2 N.</u>			3 Owner of well: <u>DUNNE - Gardner Petroleum Co.</u>			
Street address of well location if in city: <u>Macksville, KS</u>			Address: <u>200 W. Douglas, Wichita, KS</u>			
Locate with "X" in section below: 			Sketch map:			4 Well depth: <u>70</u> ft. Date of completion <u>7-25-75</u> Well diameter <u>6</u> in.
2 Type and color of material			From To		5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary	
					6 Use: ☐ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ☒ Oil Rig	
Top Soil - Clay Sand - Gravel			0 45 45 70		7 Casing: Material <u>PVC</u> Height: <u>0</u> ft. below Threaded ☐ Welded ☐ Surface <u>12</u> in. Diam. _____ Weight _____ lbs./ft. _____ <u>2</u> in. to <u>20</u> ft. depth Drive shoe? ☐ Yes ☐ No _____ in. to _____ ft. depth	
					8 Screen: Manufacturer <u>MPI</u> Type <u>PVC</u> Dia. <u>2</u> Slot/gauze <u>1/8</u> Length <u>20'</u> Set between <u>50</u> ft. and <u>70</u> ft. Fittings: <u>1/8-3/4"</u> Gravel pack ☒ Yes ☐ No Size range of material _____	
					9 Static water level: <u>21</u> ft. below land surface Date <u>7-25-75</u>	
					10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>40</u> g.p.m.	
					11 Water sample submitted: ☐ Yes ☒ No Date _____	
					12 Well head completion: ☐ Pitless adapter ☒ <u>12</u> Inches above grade	
					13 Well grouted? ☒ Yes ☐ No ☐ Neat cement ☒ Bentonite ☐ _____ Depth: From <u>0</u> ft. to <u>10</u> ft.	
					14 Nearest source of possible contamination: <u>oil</u> ft. <u>75</u> Direction <u>E</u> Type <u>Test</u> Well disinfected upon completion? ☐ Yes ☐ No	
(use a second sheet if needed)					15 Pump: ☒ Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: ☐ Submersible ☐ Turbine ☐ Jet ☐ Reciprocating ☐ Centrifugal ☐ Other	
					16 Remarks: elevation	
Topography: ☐ Hill ☐ Slope ☒ Upland ☐ Valley			17 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>Kellys Water Well Serv</u> 186 Business name _____ License No. _____ Address <u>R2 Great Bend KS</u> Signed <u>Kelly Price</u> Date <u>8-12-75</u> Authorized representative			

24 15W 13 SWNW