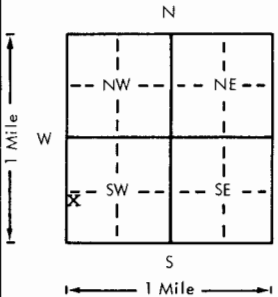


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Stafford	Fraction NW 1/4 SW 1/4 SW 1/4	Section number 28	Township number T 24 S R 15 E	Range number 15
2. Distance and direction from nearest town or city: 1 1/2 miles Southwest of Macksville, KS Street address of well location if in city:				3. Owner of well: Alvin Brensing R.R. or street: (?) City, state, zip code: Hudson, KS 67545		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 24 in. Completion date 11-28-77 Well depth 96 ft. (Well Drilled)		
				7. Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☒ Reverse rotary		
				8. Use: ☐ Domestic ☐ Public supply ☐ Industry ☒ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other		
5. Type and color of material		From	To	9. Casing: Material Steel Height: Above or below Threaded ☐ Welded ☒ Surface 12 in. RMP ☐ PVC ☐ Weight 30.3 lbs./ft. Dia. 16 in. to 56 ft. depth Wall Thickness: inches or Dia. ☐ in. to ☐ ft. depth gage No. 7 ga.		
Top soil		0	3	10. Screen: Manufacturer's name Doerr Type Double-slot Dia. 16" Slot/gauge 1/8" Length 40' Set between 56 ft. and 96 ft. Gravel pack yes Size range of material 3/8-200		
BBB Brown & gray clay & limestone streaks		3	27	11. Static water level: ☐ mo./day/yr. 12'6" ft. below land surface Date 11-28-77		
Sand & sandy clay		27	38	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.		
White clay & limestone		38	54	13. Water sample submitted: ____ mo./day/yr. ____ Yes ☒ No Date ____		
Sand & gravel		54	95	14. Well head completion: ____ Pitless adapter 12 inches above grade		
Soft brown clay		95	96	15. Well grouted? yes With: ☒ 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 ☒ No		
				17. Pump: ____ Not installed Manufacturer's name Peerless Pump Co. Model number 14LC-1 HP 80 Volts ____ Length of drop pipe 70 ft. capacity 1600 g.p.m. Type: ____ Submersible ☒ Turbine ____ Jet ____ Reciprocating ____ Centrifugal ____ Other		
				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. 185 Clarke Well & Equipment, Inc. Business name License No. ____ Address Great Bend, KS 67530 Signed [Signature] Date 4-4-78 Authorized representative		
18. Elevation:		19. Remarks:				
Topography: ____ Hill ____ Slope ____ Upland ____ Valley						

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

Form WWC-5