

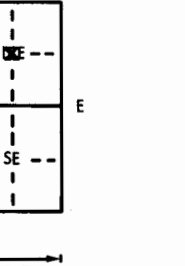
County	Stafford	Fraction	1/4 1/4 CNE 1/4	Section number	11	Township number	T 25	Range number	S R 12
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1. Location of well:
4 mi. South of Stafford, KS
Street address of well location if in city:

2. Distance and direction from nearest town or city:
4 mi. South of Stafford, KS

3. Owner of well: **Doug McClure**
R.R. or street: **Route 1**
City, state, zip code: **Stafford, KS XXXXX 67578**

4. Locate with "X" in section below: Sketch map:



5. Type and color of material

	From	To
Top soil	0	7
Brown & Gray clay	7	23
Sand & gravel	23	51

(Use a second sheet if needed)

6. Bore hole dia. 24 in. Completion date 5-17-76
Well depth 51 ft.

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 ___

9. Casing: Material Steel Height Above or below Threaded ___ Welded ☒ Surface 12 in.
RMP ___ PVC ___ Weight 30.3 lbs./ft.
Dia. 16 in. to 31 ft. depth Wall Thickness: inches or Dia. ___ in. to ___ ft. depth gage No. 7 ga.

10. Screen: Manufacturer's name W. A. Brown
Type Double-slot Dia. 16"
☒ Slot gauze 1/8 Length 20'
Set between 31 ft. and 51 ft.
Gravel pack? Yes Size range of material 3/8-200

11. Static water level: mo./day/yr. 12½ ft. below land surface Date 2-25-76

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.

13. Water sample submitted: mo./day/yr.
Yes ___ No ☒ Date _____

14. Well head completion: Pitless adapter 12 Inches above grade

15. Well grouted? Yes
With: ☒ Neat cement ___ Bentonite ___ Concrete ___
Depth: From 0 ft. to 10 ft.

NONE KNOWN

16. Nearest source of possible contamination: ft. ___ Direction ___ Type ___
Well disinfected upon completion? Yes ___ No ☒

17. Pump: Not installed
Manufacturer's name FMC Corp./Peerless
Model number 10LB-5 HP 25 Volts 460
Length of drop pipe 40 ft. capacity 400 g.p.m.
Type: ___ Submersible ___ Turbine ☒
___ Jet ___ Reciprocating
___ Centrifugal ___ Other

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
Signed [Signature] Date 5-29-
Authorized representative