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

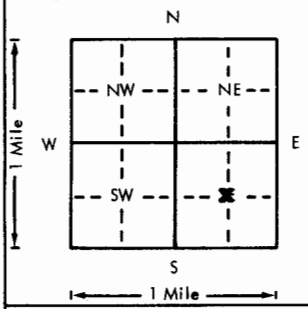
1. Location of well:	County	Fraction	Section number	Township number	Range number
	Pratt	1/4 1/4 CSE 1/4	36	T 26 S	R 14 E (W)

2. Distance and direction from nearest town or city:
3 miles West of Iuka, KS
Street address of well location if in city:

3. Owner of well: Jim McMannis
R.R. or street: (?)
City, state, zip code: Byers, KS 67021

4. Locate with "X" in section below:

Sketch map:



6. Bore hole dia. 24 in. Completion date 9-9-76
Well depth 124 ft.

7. __ Cable tool __ Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored X Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
X Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material steel Height Above (or below)
Threaded ___ Welded X Surface 12 in.
RMP ___ PVC ___ Weight 30.3 lbs./ft.
Dia. 16 in. to 70 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. 7 ga.

5. Type and color of material	From	To
top soil	0	4
brown clay	4	38
sand & sandy clay	38	48
sand & gravel	48	66
brown clay & gravel streak	66	74
sand & gravel	74	85
brown clay & limestone	85	91
sand & grave & clay streak at 104	91	123
brown clay	123	124
(Use a second sheet if needed)		

10. Screen: Manufacturer's name W. A. Brown
Type Double-slot Dia. 16"
Slot/gauze 1/8" Length 34'
Set between 70 ft. and 124 ft.
___ ft. and ___ ft.
Gravel pack? yes Size range of material 3/8-200

11. Static water level: mo./day/yr.
28'6" ft. below land surface Date 8-27-76

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 X No Date ___

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

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

16. Nearest source of possible contamination: None Known
ft. ___ Direction ___ Type ___
Well disinfected upon completion? ___ Yes X No

17. Pump: __ Not installed
Manufacturer's name FMC Corp. Peerless
Model number 12LB-3 HP 80 Volts --
Length of drop pipe 70' ft. capacity 900 g.p.m.
Type:
__ Submersible X Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

18. Elevation:

Topography:
__ Hill
__ Slope
__ Upland
__ Valley

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 & Equip., Inc. 185
Business name License No.
Address Great Bend, KS 67530
Signed [signature] Date 9-13-76
Authorized representative

T 26 R 14 (W) Sec 36 1/4 C 1/4 SE 1/4

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

Form WWC-5

MI-1023