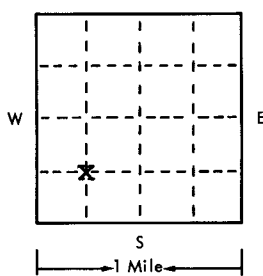


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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

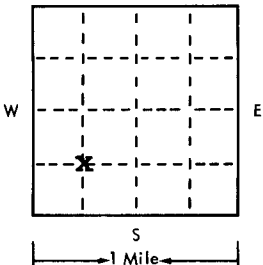
| | | | | | | |
|---|--------------------------|-------------------------------------|--|--|----------------------------|---|
| 1 Location of well: | County Edwards | Township name South Brown | Fraction CSW$\frac{1}{4}$ | Section number 2 | Town number T26S | Range number R19W |
| Distance and direction from nearest town or city: 8$\frac{1}{2}$ mi. Southeast of Kinsley, Kansas Street address of well location if in city: | | | | 3 Owner of well: Dillon Trust #247 (Fahrbach) Address: Hutchinson Nat'l Bank, Hutchinson, KS | | |
| Locate with "X" in section below: N  S 1 Mile | | | | 4 Well depth: 128 ft. Date of completion 4-30-75 Well diameter 24 in. | | |
| SEE RECORD ON PAGE 2 | | | | 5 <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary | | |
| | | | | 6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> | | |
| SEE RECORD ON PAGE 2 | | | | 7 Casing: Material Steel Height: above below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. Diam. 16 in. to 16 in. ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 16 in. to 16 in. ft. depth Weight 30.3 lbs./ft. | | |
| | | | | 8 Screen: Manufacturer Johnson Division Type 125 Irr. Dia. 16" Slot/gauze 1/8 Length 40' Set between SEE RECORD ON PAGE 2 Fittings: 3/8 Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 200 | | |
| 2 Type and color of material | | | | From | To | 9 Static water level: 22$\frac{1}{2}$ ft. below land surface Date 4-30-75 |
| Top soil | | | | 0 | 2 | 10 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. |
| Gray & brown clay & sand | | | | 2 | 17 | 11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____ |
| Sand & gravel | | | | 17 | 25 | 12 Well head completion: <input type="checkbox"/> Pitless adapter 12 inches above grade |
| Clay streaks | | | | 25 | 27 | 13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From 0 ft. to 10 ft. |
| Sand & gravel | | | | 27 | 47 | 14 Nearest source of possible contamination: ft. ____ Direction ____ Type ____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Black & gray clay & sandstone | | | | 47 | 52 | 15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.m.p. 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 |
| Sand & gravel | | | | 52 | 69 | 16 Remarks: elevation |
| Brown clay & limestone | | | | 69 | 83 | 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. Clarke Well & Eq., Inc. 185 Business name Great Bend, KS License No. ____ Address Great Bend, KS Signed D.W. Clark Date 4-30-75 Authorized representative |
| Sand & gravel | | | | 83 | 100 | |
| Brown clay & limestone | | | | 100 | 115 | |
| Sand & gravel | | | | 115 | 124 | |
| Cemented gravel | | | | 124 | 128 | |
| (use a second sheet if needed) | | | | | | |
| 16 Remarks: elevation | | | | | | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | | | | | | |

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5

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

| | | | | | |
|---|---------------|----------------------|--|-------------|--------------|
| County | Township name | Fraction | Section number | Town number | Range number |
| 1 Location of well: | Page 1 | | | | |
| Distance and direction from nearest town or city: _____ | | | 3 Owner of well: Dillon Trust #247 (Fahrbach) | | |
| Street address of well location if in city: _____ | | | Address: _____ | | |
| Locate with "X" in section below: <div style="text-align: center;">N </div> | | Sketch map: _____ | | | |
| 2 | | | From | To | |
| XXXXXXXXXXXXXX | | | | | |
| <u>CASING & SCREEN RECORD</u> | | | | | |
| Plain Casing | | | 0 | 55 | |
| Johnson Screen | | | 55 | 70 | |
| Plain Casing | | | 70 | 85 | |
| Johnson Screen | | | 85 | 100 | |
| Plain Casing | | | 100 | 116 | |
| Johnson Screen | | | 116 | 126 | |
| Plain Casing | | | 126 | 128 | |
| | | | | | |
| | | | | | |
| <u>SEE PAGE 1 FOR ALL OTHER INFORMATION</u> | | | | | |
| | | | | | |
| | | | | | |
| (use a second sheet if needed) | | | | | |
| 16 Remarks: elevation | | | 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. Business name _____ License No. _____ Address _____ Signed _____ Date _____ Authorized representative | | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | | | | | |

Form WWC-5