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

sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

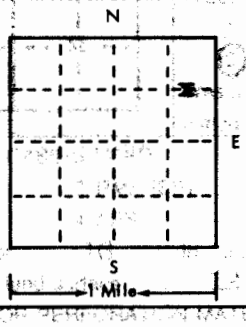
Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County	Township name	Fraction	Section number	Town number	Range number
	Gray	Cimarron	SE¼ of NE¼	16	T-26-S	R-27-W

Distance and direction from nearest town or city: 1 mi south and 4 east of Cimarron
Street address of well location if in city:

3 Owner of well: John Jillie
Address: Cimarron, Kansas

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



4 Well depth: 176 ft. Date of completion 10-28-75
Well diameter 28 in.

5 [X] Cable tool [ ] Rotary [ ] Driven [ ] Dug [ ] Hollow rod [X] Jetted [ ] Bored [X] Reverse rotary

6 Use: [ ] Domestic [ ] Public supply [ ] Industry [X] Irrigation [ ] Air conditioning [ ] Commercial [ ] Test well [ ]

7 Casing: Material Metal Weight: above/below
Threaded [ ] Welded [X] Surface 12 in. Diam. 16 in. to 176 ft. depth Weight 30.30 lbs./ft. 1
Drive shoe? [ ] Yes [X] No
___ in. to ___ ft. depth

2 Type and color of material	From	To
Surface	0	4
Sand and gravel	4	38
Fine sand and sandy clay	38	95
Med. sand	95	100
Fine sand	100	130
~~###~~ Good sand & flat river gravel	130	174
~~###~~ Yellow clay	174	178
(use a second sheet if needed)		

8 Screen:
Manufacturer WA Brown
Type Free-flo Dia. 16
Slot/gauze 1/8 Length 2ft
Set between 136 ft. and 176 ft.
Fittings:
Gravel pack [X] Yes [ ] No Size range of material CMA

9 Static water level: 20 ft. below land surface Date 10-28-75

10 Pumping level below land surface: NA
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield ___ g.p.m.

11 Water sample submitted: [ ] Yes [X] No Date ___

12 Well head completion: [ ] Pitless adapter [X] Inches above grade

13 Well grouted? [X] Yes [ ] No
[X] Neat cement [ ] Bentonite [ ] ___
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination: NA
ft. ___ Direction ___ Type ___
Well disinfected upon completion? [ ] Yes [X] No

15 Pump: [ ] Not installed
Manufacturer's name Goulds
Model number 12JLC HP 80 Volts ___
Length of drop pipe 100 ft. capacity 800 g.m.p.
Type:
[ ] Submersible [X] Turbine
[ ] Jet [ ] Reciprocating
[ ] Centrifugal [ ] Other

16 Remarks: elevation

Topography:
[ ] Hill
[ ] Slope
[ ] Upland
[X] 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.
Business name Ace-Hi Int. Inc. License No. 190
Address Dodge City, Kansas
Signed Carl Stitt Date 11-8-75
Authorized representative

26 27W 16 NW SE NE

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

Form WWC-5

677-H