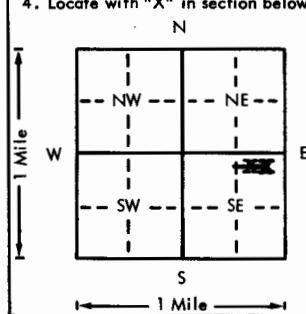
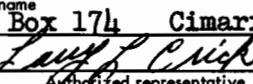


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 Gray	Fraction NE 1/4 NE 1/4 SE 1/4	Section number 9	Township number T 26	Range number S R 28 E/W
2. Distance and direction from nearest town or city: 2 1/2 miles west of Cimarron, Ks.	3. Owner of well: Willey McFarland R.R. or street: City, state, zip code: Cimarron, Kansas 67835				
4. Locate with "X" in section below:  	Sketch map:  				
6. Bore hole dia. 8 10 in. Completion date _____ Well depth 165 ft. 12-28-76					
7. <input checked="" 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 type="checkbox"/> Reverse rotary					
8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other					
9. Casing: Material RMP <input type="checkbox"/> Height: Above ground Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 6 5/8 to 165 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 250					
10. Screen: Manufacturer's name Sunflower Type RMP <input type="checkbox"/> Dia. 6 5/8" Slot/size 1/8" Length 20 ft. Set between 110 ft. and 160 ft. Gravel pack <input checked="" type="checkbox"/> Size range of material 1/4"					
11. Static water level: mo./day/yr. 5 ft. below land surface Date 12-28-76					
12. Pumping level below land surfaces: 26 ft. after 1 hrs. pumping 125 g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield 150 g.p.m.					
13. Water sample submitted: mo./day/yr. Yes <input checked="" type="checkbox"/> No Date					
14. Well head completion: None <input type="checkbox"/> Pitless adapter _____ Inches above grade					
15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.					
16. Nearest source of possible contamination: None ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
17. Pump: Windmill <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. 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					
(Use a second sheet if needed)					
18. Elevation:	19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	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. JOE'S WELL SERVICE 199 Business name _____ License No. _____ Address Box 174 Cimarron, Ks. Signed  Date 2-1-77 Authorized representative				