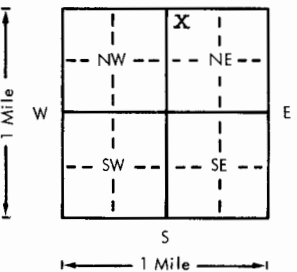


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <b>Kingman</b>	Fraction <b>nw 1/4 nw 1/4 ne 1/4</b>	Section number <b>29</b>	Township number <b>T 27 S R 10 E W</b>	Range number <b>10</b>	
2. Distance and direction from nearest town or city: <b>1/2-E of Skelleyville, Ks.</b> Street address of well location if in city:			3. Owner of well: <b>Northern Natural Gas Co.</b> R.R. or street: <b>Box 178</b> City, state, zip code: <b>Cunningham, Ks. 67036</b>			
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 		<input checked="" type="checkbox"/> Bore hole dia. <b>6 3/4</b> in. Completion date _____ Well depth <b>55</b> ft. <b>5-30-78</b> 7. <input type="checkbox"/> Cable tool <input checked="" 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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other 9. Casing: Material <b>pvc</b> Height: Above or below _____ Threaded _____ Welded _____ Surface <b>18</b> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <b>4 1/2</b> in. to <b>55</b> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. <b>237</b>		
5. Type and color of material			From	To	10. Screen: Manufacturer's name _____ <b>CertainTeed</b> Type <b>pvc</b> Dia. _____ Slot <del>xxx</del> <b>1/16</b> Length <b>15</b> Set between <b>40</b> ft. and <b>55</b> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>3/4 3/8</b>	
<b>top soil</b>			<b>0</b>	<b>2</b>	11. Static water level: _____ mo./day/yr. <b>artesian</b> below land surface Date <b>5-30-78</b>	
<b>black clay w/sand streaks</b>			<b>2</b>	<b>48</b>	12. Pumping level below land surfaces: <b>na</b> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
<b>sand &amp; gravel</b>			<b>48</b>	<b>62</b>	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
<b>red bed</b>			<b>62</b>		14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.	
					16. Nearest source of possible contamination: ft. <b>75</b> Direction <b>sw</b> Type <b>oilwell</b> Well disinfected upon completion? <b>ntb</b> Yes _____ No _____	
					17. Pump: <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:  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley	19. Remarks: <i>This hole was reamed to 9 7/8" before casing was set.</i>				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. <del>XXXXX</del> <b>Rosencrantz-Bemis 134</b> Business name _____ License No. _____ Address <b>Great Bend, Ks. 67530</b> Signed <i>S. Kilgore</i> Date <b>6-20-79</b> Authorized representative	

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