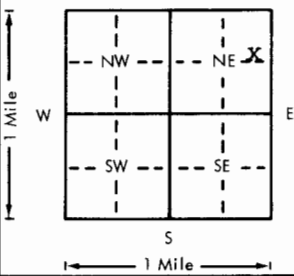


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Pratt | Fraction se 1/4 ne 1/4 ne 1/4 | Section number 24 | Township number T 27 S R 11 | Range number 11 |
| 2. Distance and direction from nearest town or city: 2-W 2 1/2-N West side from XXXXX Cunningham, Kas. Street address of well location if in city: | | | | 3. Owner of well: Northern Natural Gas Co. Box 88 City, state, zip code: Lyons, Kansas 67554 | | |
| 4. Locate with "X" in section below: N W E S 1 Mile 1 Mile | | | | Sketch map:  | | |
| 5. Type and color of material | | | | From | To | |
| top soil | | | | 0 | 2 | |
| brown clay | | | | 2 | 12 | |
| sand & gravel | | | | 12 | 42 | |
| clay | | | | 42 | 51 | |
| sand & gravel | | | | 51 | 68 | |
| clay | | | | 68 | 83 | |
| sand & gravel | | | | 83 | 118 | |
| brown clay | | | | 118 | 127 | |
| sand & gravel | | | | 127 | 154 | |
| red bed | | | | 154 | 155 | |
| (Use a second sheet if needed) | | | | | | |
| 18. Elevation: 1741.86' ± 1 Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley | | 19. Remarks: | | 6. Bore hole dia. 12 1/4 in. Completion date _____ Well depth 135 ft. 1-22-79 | | |
| | | | | 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 checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other | | |
| | | | | 9. Casing: Material pvc Height: Above or 1000 Threaded _____ Welded _____ Surface 18 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 6 5/8 to 135 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 280 | | |
| | | | | 10. Screen: Manufacturer's name CertainTeed Type pvc Dia. _____ Slot 1/16 Length 40 Set between 135 ft. and 95 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/4 3/8 | | |
| | | | | 11. Static water level: _____ mo./day/yr. 37 ft. below land surface Date 1-22-79 | | |
| | | | | 12. Pumping level below land surfaces: na _____ 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. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date 1-22-79 | | |
| | | | | 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 0 ft. to 10 ft. | | |
| | | | | 16. Nearest source of possible contamination: ft. 20 Direction west Type waterwell Well disinfected upon completion? hth Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| | | | | 17. Pump: _____ Not installed Manufacturer's name Red Jacket Model number 4HB HP 10 Volts 230 Length of drop pipe 105' ft. capacity 150 g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other | | |
| 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. Rosencrantz-Bemis 134 Business name License No. Address Great Bend, Kansas 67530 Signed Sandy Kilgore Date 2-8-79 Authorized representative | | | | | | |

27 11 24 SE NE NE 1/4 1/4 1/4

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

Form WWC-5