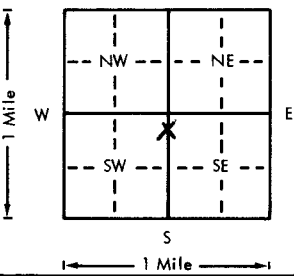


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

*N 1/2 N 1/2 S 1/2*

1. Location of well: County <i>Pratt</i>		Fraction <i>20 ft S. of Centurline</i> 1/4 1/4 1/4		Section number <i>36</i>	Township number <i>T 27 S R 11 E 10</i>	Range number
2. Distance and direction from nearest town or city: <i>5 mi. east of Cairo, Ks.</i> Street address of well location if in city:				3. Owner of well: <i>George McClellan</i> R.R. or street: <i>none</i> City, state, zip code: <i>Cunningham, Ks 67035</i>		
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		6. Bore hole dia. <i>4 1/2</i> in. Completion date <i>3-6-78</i> Well depth <i>42</i> ft.		
5. Type and color of material		From	To	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		
<i>Top soil</i>		<i>0</i>	<i>1</i>	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		
<i>Brown clay</i>		<i>1</i>	<i>10</i>	9. Casing: Material <i>PVC</i> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <i>24</i> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <i>4 1/2</i> in. to <i>40</i> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <i>237</i>		
<i>Brown &amp; white clay</i>		<i>10</i>	<i>19</i>	10. Screen: Manufacturer's name <i>Certainat rods</i> Type <i>PVC</i> Dia. _____ Slot/gauze <i>1/16</i> Length _____ Set between <i>25</i> ft. and <i>40</i> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>20-30</i>		
<i>Sandy clay</i>		<i>19</i>	<i>24</i>	11. Static water level: _____ mo./day/yr. <i>10</i> ft. below land surface Date <i>3-6-78</i>		
<i>White clay</i>		<i>24</i>	<i>25</i>	12. Pumping level below land surfaces: <i>10</i> ft. after <i>12</i> hrs. pumping <i>10</i> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <i>30</i> g.p.m.		
<i>Sand &amp; gravel-mixed brown clay</i>		<i>25</i>	<i>42</i>	13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <i>3-6-78</i>		
<i>Brown clay</i>		<i>42</i>		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 <i>0</i> ft. to <i>10</i> ft.		
				16. Nearest source of possible contamination: ft. <i>20</i> Direction <i>South</i> Type <i>old well</i> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> 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		
18. Elevation:		19. Remarks: <i>#16 - old water well was 70 feet deep &amp; turned salty.</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. <i>Bosman &amp; Sons 134</i> Business name _____ License No. _____ Address <i>Great Bend, Ks. 67530</i> Signed <i>Tracy L. Gore</i> Date _____ Authorized representative		

T 27 S R 11 E 10  
36 N 1/2 S 1/2

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

Form WWC-5