

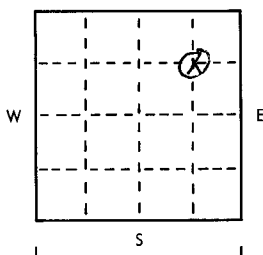
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

T R EW 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

Invoice #10909 Thompson #1

1 Location of well:	County Kiowa	Township name	Fraction C-NE	Section number 18	Town number T 27 S	Range number R 17 W		
Distance and direction from nearest town or city: 1 mile east, 5 north, and 2 east of Greensburg. Street address of well location if in city:				3 Owner of well: Sage Drilling Co. c/o Albert Freeman Address: Box 1459, Liberal, Kansas 67901				
Locate with "X" in section below: N  W E S 1 Mile			Sketch map:			4 Well depth: 120 ft. Date of completion 12-27-74 Well diameter 9 in.		
2 Type and color of material			From	To	5 <input 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			
			Surface		0	2	6 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"/> Commercial <input type="checkbox"/> Test well <input checked="" type="checkbox"/> Oil Well	
			Sandy Clay		2	15	7 Casing: Material PVC Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. Digm. Weight 278 lbs./ft. 5 1/2 in. to 75 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 5 1/2 in. to 120 ft. depth	
			Medium Sand		15	37	8 Screen: Manufacturer WESCO Type PVC Dia. 5 1/2 Slot/gauze .030 Length 30 Set between 75 ft. and 115 ft. Fittings: 1/8-3/16 Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material	
			Coarse Sand		37	73	9 Static water level: 25 ft. below land surface Date 12-27-74	
			Coarse Gravel		73	89	10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 60 g.p.m.	
			Coarse Sand		89	115	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date	
			Clay		115	120	12 Well head completion: 12 <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade	
			(use a second sheet if needed)				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From 0 ft. to 10 ft.	
			16 Remarks: elevation			14 Nearest source of possible contamination: ft. 100 Direction SW Type oil well Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley			15 Pump: <input type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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					
			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. Carlile Water Well 118 Business name License No. _____ Address Box 275, Liberal, KS 67901 Signed: <i>Edward E. Mann</i> Date _____ Authorized representative					

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

Form WWC-5