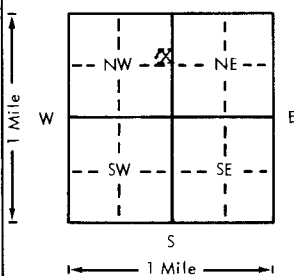


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82o-1201-1215

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

|  |  |                        |  |                             |  |                                  |
|--|--|------------------------|--|-----------------------------|--|----------------------------------|
| 1. Location of well:   |  | County<br><b>Kiowa</b> | Fraction<br><b>se 1/4 ne 1/4 NW 1/4</b>  | Section number<br><b>23</b> | Township number<br><b>T 27 S</b>   | Range number<br><b>R 18w E/W</b> |
| 2. Distance and direction from nearest town or city:<br><b>5n</b><br>Street address of well location if in city:<br><b>Greensberg, Ks.</b>             |  |                        | 3. Owner of well:<br><b>Gabbert Jones Inc.</b><br>R.R. or street:<br><b>830 Sutton Pl.</b><br>City, state, zip code:<br><b>Wichita Ks 67202</b>  |                             |  |                                  |
| 4. Locate with "X" in section below:<br>N<br><br>W<br>E<br>S<br>1 Mile |  |                        | Sketch map:  |                             | 6. Bore hole dia. <b>8</b> in. Completion date _____<br>Well depth <b>75</b> ft. <b>12-16-77</b>   |                                  |
| 5. Type and color of material  |  |                        | From   |                             | To   |                                  |
|  |  |                        | Top Soil-Clay  |                             | 0  | 34                               |
|  |  |                        | Sandy Clay   |                             | 34   | 45                               |
|  |  |                        | Sand   |                             | 45   | 55                               |
|  |  |                        | Sand-Gravel  |                             | 55   | 75                               |
|  |  |                        | 10. Screen: Manufacturer's name<br><b>Jetstream</b>  |                             | Type <b>pvc</b> Dia. <b>5"</b><br>Slot/gauze <b>1/32"</b> Length <b>20'</b><br>Set between <b>55</b> ft. and <b>75</b> ft.<br>Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8-3/4"</b>  |                                  |
|  |  |                        | 11. Static water level: _____ mo./day/yr.<br><b>40</b> ft. below land surface Date <b>12-16-77</b>   |                             | 12. Pumping level below land surfaces:<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>Estimated maximum yield <b>50</b> g.p.m.   |                                  |
|  |  |                        | 13. Water sample submitted: _____ mo./day/yr.<br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____  |                             | 14. Well head completion:<br>_____ Pitless adapter <b>12</b> Inches above grade  |                                  |
|  |  |                        | 15. Well grouted? <input checked="" type="checkbox"/><br>With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete<br>Depth: From <b>0</b> ft. to <b>10</b> ft.   |                             | 16. Nearest source of possible contamination: <b>oil test</b><br>ft. <b>50</b> Direction <b>s</b> Type <b>test</b><br>Well disinfected upon completion? _____ Yes <input checked="" type="checkbox"/> No   |                                  |
|  |  |                        | 17. Pump: <input checked="" type="checkbox"/> Not installed<br>Manufacturer's name _____<br>Model number _____ HP _____ Volts _____<br>Length of drop pipe _____ ft. capacity _____ g.p.m.<br>Type:<br>_____ Submersible _____ Turbine<br>_____ Jet _____ Reciprocating<br>_____ Centrifugal _____ Other |                             | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.<br><b>Kellys Waterwell Ser 186</b><br>Business name _____ License No. _____<br>Address <b>R2 Great Bend, Ks.</b><br>Signed <b>Kelly Price</b> Date <b>8-20-77</b><br>Authorized representative |                                  |
| 18. Elevation:   |  |                        | 19. Remarks:<br><br>(Use a second sheet if needed)   |                             |  |                                  |
| Topography:<br>_____ Hill<br>_____ Slope<br><input checked="" type="checkbox"/> Upland<br>_____ Valley   |  |                        |  |                             |  |                                  |

T 27 S  
 R 18w E/W  
 Sec 23  
 SE 1/4 NW 1/4

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

Form WWC-5