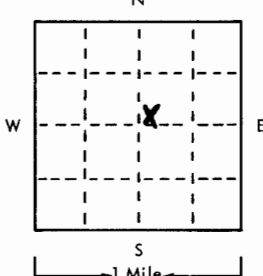
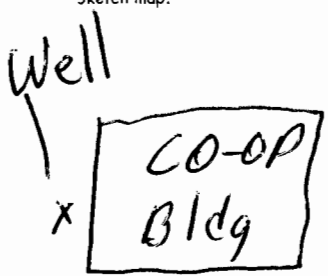


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County: <u>Sedg.</u>	Township name: <u>Golden Plain</u>	Fraction: <u>SW-SW-NE</u>	Section number: <u>31</u>	Town number: <u>27S.</u>	Range number: <u>3W</u>
Distance and direction from nearest town or city:				3 Owner of well: <u>Golden Plain CO-OP</u>		
Street address of well location if in city:				Address: <u>Golden Plain KS 67050.</u>		
Locate with "X" in section below: 				Sketch map: 		
2 Type and color of material				4 Well depth: <u>65</u> ft. Date of completion: <u>7/27/76</u> Well diameter: <u>11"</u> in.		
<u>Top soil.</u> <u>red clay</u> <u>fine sand</u> <u>blue green shale</u>				5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary		
				6 Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well		
				7 Casing: Material <u>PVC</u> Height: above/below Threaded ☐ Welded ☒ Surface <u>17</u> in. Diam. <u>5</u> in. to <u>65</u> ft. depth Drive shoe? ☐ Yes ☒ No		
				8 Screen: <u>Pumpco MPI</u> Manufacturer: <u>Pumpco MPI</u> Type <u>PVC</u> Dia. <u>5 in</u> Slot gauge <u>1/16</u> Length <u>3 ft.</u> Set between <u>60</u> ft. and <u>65</u> ft. Fittings: <u>3/8</u> Gravel pack ☒ Yes ☐ No Size range of material <u>3/8</u>		
				9 Static water level: <u>28</u> ft. below land surface Date <u>7/27/76</u>		
				10 Pumping level below land surfaces: <u>56</u> ft. after <u>12</u> hrs. pumping <u>5</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>8</u> g.p.m.		
				11 Water sample submitted: ☐ Yes ☒ No Date _____		
				12 Well head completion: ☒ Pitless adapter ☐ Inches above grade		
				13 Well grouted? ☒ Yes ☐ No ☒ Neat cement ☐ Bentonite ☐ Depth: From <u>3</u> ft. to <u>13</u> ft.		
				14 Nearest source of possible contamination: ft. _____ Direction <u>None</u> Type _____ Well disinfected upon completion? ☒ Yes ☐ No		
				15 Pump: <u>Webtrol</u> ☐ Not installed Manufacturer's name <u>Pumpco</u> Model number <u>1052</u> HP <u>1/2</u> Vol <u>220</u> Length of drop pipe <u>60</u> ft. capacity <u>5</u> g.m.p. Type: ☒ Submersible ☐ Turbine ☐ Jet ☐ Reciprocating ☐ Centrifugal ☐ Other		
16 Remarks: elevation				17 Water well contractor's certification:		
(use a second sheet if needed) <u>Well has been done with</u> <u>4x4x4 slab as</u> <u>per regulations</u>				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Whitney Helling</u> 3/18 Business name <u>Golden Plain</u> License No. _____ Address <u>Golden Plain KS</u> Signature <u>[Signature]</u> Date <u>7/27/76</u> Authorized representative		

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

Form WWC-5