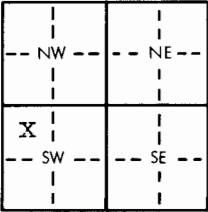


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 <b>Pratt</b>	Fraction <b>1/4 cnw 1/4 SW 1/4</b>	Section number <b>28</b>	Township number <b>T 28 S</b>	Range number <b>R 11W E/W</b>
2. Distance and direction from nearest town or city: <b>5s 1e</b> Street address of well location if in city: <b>Cairo, Ks.</b>			3. Owner of well: <b>Damac Brlg Inc.</b> R.R. or street: <b>Box 1164</b> City, state, zip code: <b>Great Bend, Ks.</b>			
4. Locate with "X" in section below: N 1 Mile W E S 1 Mile			Sketch map: 		6. Bore hole dia. <b>8</b> in. Completion date _____ Well depth <b>130</b> ft. <b>10-13-77</b>	
5. Type and color of material			From		To	
			Top soil clay		0	50
			Sand		50	70
			clay		70	85
			Sand-Gravel		85	130
10. Screen: Manufacturer's name <b>Jetstream</b> Type <b>pvc</b> Dia. <b>5"</b> Slot/gauze <b>1/32"</b> Length <b>40</b> Set between <b>90</b> ft. and <b>130</b> ft. Gravel pack? <b>x</b> Size range of material <b>1/8-3/4"</b>			9. Casing: Material _____ Height: Above or below _____ Threaded _____ Welded _____ Surface <b>12</b> in. RMP _____ PVC <b>x</b> Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>130</b> ft. depth Wall Thickness _____ inches or Dia. _____ in. to _____ ft. depth Gauge No. <b>sch 40</b>			
11. Static water level: _____ mo./day/yr. <b>43</b> ft. below land surface Date <b>10-13-77</b>			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>60</b> g.p.m.			
13. Water sample submitted: _____ mo./day/yr. Yes _____ No <b>x</b> Date _____			14. Well head completion: _____ Pitless adapter <b>12</b> Inches above grade			
15. Well grouted? <b>x</b> With: _____ Neat cement <b>x</b> Bentonite _____ Concrete _____ Depth: From <b>0</b> ft. to <b>10</b> ft.			16. Nearest source of possible contamination: _____ oil test ft. <b>70</b> Direction <b>se</b> Type _____ Well disinfected upon completion? _____ Yes <b>x</b> No			
17. Pump: <b>x</b> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: _____ Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ 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. <b>Kellys Waterwell Ser 186</b> Business name _____ License No. _____ Address <b>R2 Great Bend, Ks.</b> Signed <b>Kelly Dmar</b> Date <b>8-7-79</b> Authorized representative			
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: _____ Hill _____ Slope <b>x</b> Upland _____ Valley						

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

Form WWC-5