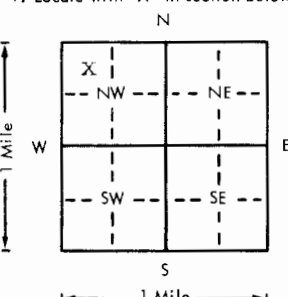


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>Kiowa</b>	Fraction <b>c 1/4 nw 1/4 nw 1/4</b>	Section number <b>27</b>	Township number <b>T 28 S R 18 E/W</b>	Range number
2. Distance and direction from nearest town or city: <b>1 1/2 S of Greensburg, Ks.</b> Street address of well location if in city:				3. Owner of well: <b>Slawson Drilling Co.</b> R.R. or street: <b>Box 1131</b> City, state, zip code: <b>Great Bend, Kansas 67530</b>		
4. Locate with "X" in section below: Sketch map: 				6. Bore hole dia. <b>10</b> in. Completion date _____ Well depth <b>140</b> ft. <b>5-21-79</b>		
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
sandy top soil				0	2	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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other
clay				2	26	9. Casing: Material <b>pvc</b> Height: Above or <del>below</del> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>18</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <b>4 1/2</b> in. to <b>140</b> ft. depth   Wall Thickness: inches or Dia. _____ in. to _____ ft. depth   gage No. <b>237</b>
sandy clay				26	58	10. Screen: Manufacturer's name _____ <b>CertainTeed</b> Type <b>pvc</b> Dia. _____ Slot <del>3/16</del> <b>1/16</b> Length <b>20</b> Set between <b>120</b> ft. and <b>140</b> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>3/4 3/8</b>
dry sand & gravel				58	103	11. Static water level: _____ mo./day/yr. <b>105</b> ft. below land surface Date <b>5-4-79</b>
clay				103	117	12. Pumping level below land surfaces: <b>105</b> ft. after <b>1</b> hrs. pumping <b>100</b> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>200</b> g.p.m.
good clean sand & gravel				117	137	13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____
clay				137	140	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade
(Use a second sheet if needed)						15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.
						16. Nearest source of possible contamination: ft. <b>300</b> Direction <b>ne</b> Type <b>oilwell</b> Well disinfected upon completion? <input checked="" 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:		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>Rosencrantz-Bemis</b> <b>134</b> Business name License No. Address <b>Great Bend, Kansas 67530</b> Signed <b>Sandy Tulgore</b> date <b>5-24-79</b> Authorized Representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

28 18 22 1/4 C NW NW

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

Form WWC-5