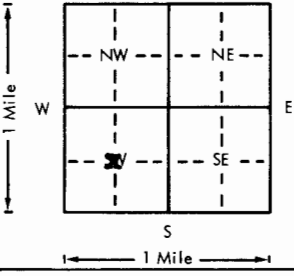


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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<br><u>Kiowa</u>   | Fraction<br><u>1/4 C 1/4 SW 1/4</u> | Section number<br><u>2</u>   | Township number<br><u>T 28 S R 19 E/W</u> | Range number<br><u>19</u> |
| 2. Distance and direction from nearest town or city:<br><u>4 W - 2 N - East into field from Greensburg, Ks.</u>   |  |  |                                     | 3. Owner of well:<br><u>Butch Pyle</u><br>R.R. or street:<br><u>106 Plaza Terrace</u><br>City, state, zip code:<br><u>Dodge City, Kansas 67801</u>   |   |                           |
| 4. Locate with "X" in section below: Sketch map:  |  |  |                                     | <input checked="" type="checkbox"/> Bore hole dia. <u>8 3/4</u> ft. Completion date _____<br>Well depth <u>184</u> ft. <u>9-26-77</u>  |   |                           |
| N<br>   |  |  |                                     | 7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary   |   |                           |
| 5. Type and color of material   |  |  |                                     | 8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry<br><input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other   |   |                           |
|   |  |  |                                     | 9. Casing: Material <u>steel</u> Height: Above or below<br>Threaded _____ Welded <input checked="" type="checkbox"/> Surface <u>24</u> in.<br>RMP _____ PVC _____ Weight _____ lbs./ft.<br>Dia. <u>1 1/2</u> in. to <u>184</u> ft. depth Wall Thickness: inches or<br>Dia. _____ in. to _____ ft. depth gage No. <u>7</u>  |   |                           |
|   |  |  |                                     | 10. Screen: Manufacturer's name _____<br><u>Doerrs</u><br>Type <u>Steel</u> Dia. <u>1 1/2</u> "<br>Slot <u>3/16</u> Length <u>60</u><br>Set between <u>124</u> ft. and <u>184</u> ft.<br>_____ ft. and _____ ft.<br>Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4 3/8</u>   |   |                           |
|   |  |  |                                     | 11. Static water level: _____ mo./day/yr.<br><u>80</u> ft. below land surface Date <u>8-1-77</u>   |   |                           |
|   |  |  |                                     | 12. Pumping level below land surfaces:<br><u>91</u> ft. after <u>1</u> hrs. pumping <u>600</u> g.p.m.<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>Estimated maximum yield <u>1400</u> g.p.m.   |   |                           |
|   |  |  |                                     | 13. Water sample submitted: _____ mo./day/yr.<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>8-1-77</u>  |   |                           |
|   |  |  |                                     | 14. Well head completion:<br><input type="checkbox"/> Pitless adapter _____ inches above grade   |   |                           |
|   |  |  |                                     | 15. Well grouted? <input checked="" type="checkbox"/><br>With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete<br>Depth: From <u>0</u> ft. to <u>10</u> ft.   |   |                           |
|   |  |  |                                     | 16. Nearest source of possible contamination:<br><u>3/4 mi</u> Direction <u>north</u> Type <u>oil well</u><br>Well disinfected upon completion? <u>HTH</u> Yes <input type="checkbox"/> No   |   |                           |
|   |  |  |                                     | 17. Pump: _____ Not installed<br>Manufacturer's name <u>W.L.B.</u><br>Model number <u>5-12BH</u> HP <u>80</u> Volts _____<br>Length of drop pipe <u>130</u> ft. capacity <u>1100</u> g.p.m.<br>Type:<br><input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |   |                           |
| (Use a second sheet if needed)  |  |  |                                     |  |   |                           |
| 18. Elevation:  |  | 19. Remarks:   |                                     |  |   |                           |
| Topography:<br><input type="checkbox"/> Hill<br><input type="checkbox"/> Slope<br><input checked="" type="checkbox"/> Upland<br><input type="checkbox"/> Valley |  |  |                                     |  |   |                           |
|   |  | 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><u>Rosencrantz-Bemis</u> <u>134</u><br>Business name License No.<br>Address <u>Great Bend, Kans.</u> <u>67530</u><br>Signed <u>Sandy Kilgore</u> Date <u>9-30-77</u><br>Authorized representative |                                     |  |   |                           |

T 28 S R 19 E  
 Sec 2 - C 5 W

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

Form WWC-5