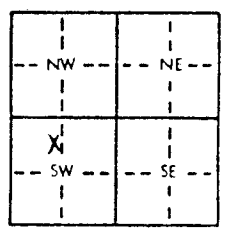


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Plugging Report

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

1. Location of well:	County <u>CLARK</u>	Fraction <u>NE 1/4 NW 1/4 SW 1/4</u>	Section number <u>8</u>	Township number <u>T 30 S</u>	Range number <u>R 25 EW</u>
2. Distance and direction from nearest town or city: <u>3.5 W + 0.5 NW of Minneola</u> Street address of well location if in city:			3. Owner of well: <u>E. T. Wears</u> R.R. or street: <u>301 OAK</u> City, state, zip code: <u>Minneola Kansas 67865</u>		
4. Locate with "X" in section below: <div style="text-align: center;">N 1 Mile 1 Mile S</div>  <div style="text-align: center;">W E</div>			Sketch map:		
5. Type and color of material			6. Bore hole dia. _____ in. Completion date _____ Well depth <u>140</u> ft. <u>2-8-81</u>		
			7. Cable tool _____ Rotary _____ Driven _____ Dug _____ Hollow rod _____ Jetted _____ Bored _____ Reverse rotary _____		
8. Use: _____ Domestic _____ Public supply _____ Industry _____ Irrigation _____ Air conditioning _____ Stock _____ Lawn _____ <input checked="" type="checkbox"/> Oil field water _____ Other _____			9. Casing: Material _____ Height: Above or below _____ Threaded _____ Welded _____ Surface <u>357</u> _____ RMP _____ PVC _____ Weight _____ lbs./ft. _____ Dia. _____ in. to _____ ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. _____		
			10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ Gravel pack? _____ Size range of material _____		
11. Static water level: _____ mo./day/yr. _____ <u>55</u> ft. below land surface Date <u>1-18-81</u>			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ _____ ft. after _____ hrs. pumping _____ g.p.m. _____ Estimated maximum yield _____ g.p.m. _____		
			13. Water sample submitted: _____ mo./day/yr. _____ Yes _____ No _____ Date _____		
14. Well head completion: _____ Pitless adapter _____ inches above grade			15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From <u>3</u> ft. to <u>13</u> ft.		
			16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? _____ Yes _____ No _____		
17. Pump: _____ 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 _____			18. Elevation:		
			19. Remarks: <u>Water Well was plugged</u> <u>2-8-81 - cut casing off</u> <u>3' below ground surface</u>		
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. <u>P.W. Water Well</u> <u>142</u> Business name _____ License No. _____ Address <u>200 S. 1st St. Liberal, KS 67861</u> Signed <u>[Signature]</u> Date <u>2/17/81</u> Authorized representative					