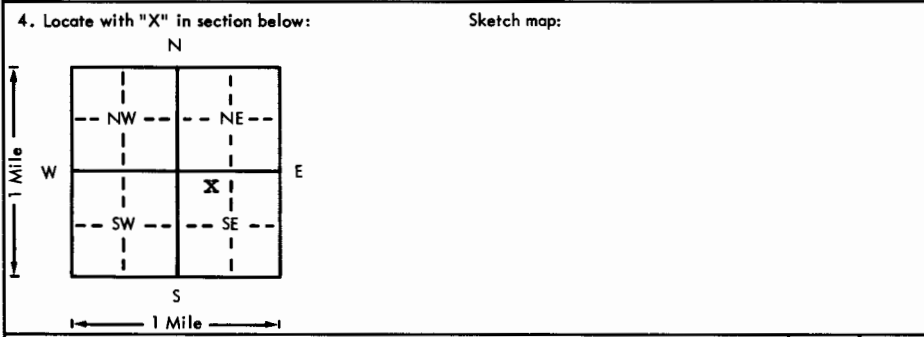


WATER WELL RECORD
KSA 82a-1201-1215

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

1. Location of well:
 Fraction: **NW 1/4 NW 1/4 SE 1/4** Section number: **29** Township number: **T 30 S R 26** Range number: **E/W**

2. Direction and distance from nearest town or city:
 Street address of well location if in city:
 3. Owner of well: **Don Hildebrandt**
 R.R. or street:
 City, state, zip code: **Fowler, Kansas 67844**



6. Bore hole dia. **9 7/8** in. Completion date _____
 Well depth **105** ft.
 7. Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored Reverse rotary
 8. Use: Domestic Public supply Industry
 Irrigation Air conditioning Stock
 Lawn Oil field water Other
 9. Casing: Material **PVC** Height: Above or below
 Threaded Welded Surface **12** in.
 RMP PVC Weight **291** lbs./ft.
 Dia. **5** in. to **105** ft. depth Wall Thickness: inches or
 Dia. _____ in. to _____ ft. depth gage No. **265**

5. Type and color of material	From	To
Top soil	0	5
Clay (Lost circulation zones)	5	58
Med. to lar. sand & gravel with small clay streaks	58	145
White white clay	145	148
Caliche	148	150
(Use a second sheet if needed)		

10. Screen: Manufacturer's name **Jess & Lowell**
 Type **PVC** Dia. **5"**
 Slot/gauge **fine** Length **40'**
 Set between **65** ft. and **105** ft.
 _____ ft. and _____ ft.
 Gravel pack? **yes** Size range of material **3/16"**
 11. Static water level: _____ mo./day/yr.
5 ft. below land surface Date **1/15/77**
 12. Pumping level below land surfaces:
25 ft. after **1 1/2** hrs. pumping **130** g.p.m.
 _____ ft. after _____ hrs. pumping _____ g.p.m.
 Estimated maximum yield **150+** g.p.m.
 13. Water sample submitted: _____ mo./day/yr.
 Yes No Date _____
 14. Well head completion:
 Pitless adapter **12** Inches above grade
 15. Well grouted? **Yes**
 With: Neat cement Bentonite Concrete
 Depth: From **0** ft. to **4** ft.
 16. Nearest source of possible contamination:
 ft. **30** Direction **East** Type **old well**
 Well disinfected upon completion? Yes No
 17. Pump: _____ Not installed
 Manufacturer's name **Customer Completed**
 Model number _____ HP _____ Volts _____
 Length of drop pipe _____ ft. capacity _____ g.p.m.
 Type:
 Submersible Turbine
 Jet Reciprocating
 Centrifugal Other

18. Elevation: Topography: Hill Slope Upland Valley

19. Remarks: **We just drilled the well. The customer did the rest.**

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.
Friesen Windmill 252
 Business name License No.
 Address **Meade, Kansas 67864**
 Signed *[Signature]* Date **2/21/77**
 Authorized representative

100

30
 26
 29
 NW
 1/4
 1/4
 SE