

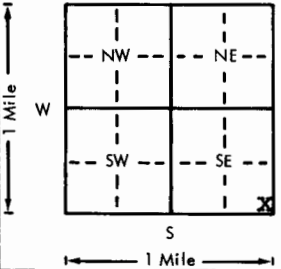
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

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

*Fowler, K.*

*0 0 0 Fowler*

|   |  |                        |   |  |                                       |   |  |
|---|--|------------------------|---|--|---------------------------------------|---|--|
| 1. Location of well:  |  | County<br><b>Meade</b> | Fraction<br><b>SE 1/4 SE 1/4 SE 1/4</b> | Section number<br><b>33</b>  | Township number<br><b>T 30 S R 26</b> | Range number<br><b>E/W</b>  |  |
| 2. Distance and direction from nearest town or city:<br><b>3/4 mi east of Fowler, Ks</b><br>Street address of well location if in city:   |  |                        |   | 3. Owner of well: <b>Don Bergkamp</b><br>R.R. or street: <b>Fowler, Kansas</b><br>City, state, zip code:   |                                       |   |  |
| 4. Locate with "X" in section below:<br>N<br>W E<br>S<br>1 Mile<br>1 Mile   |  |                        |   | Sketch map:<br>   |                                       | 6. Bore hole dia. <b>28</b> in. Completion date _____<br>Well depth <b>183</b> ft. <b>4-12-79</b>   |  |
| 5. Type and color of material   |  |                        |   | 7. <input type="checkbox"/> Cable/foot <input 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 checked="" type="checkbox"/> Reverse rotary   |                                       | 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>metal</u> Height: Above or below<br>Threaded _____ Welded <input checked="" type="checkbox"/> Surface <u>12</u> in.<br>RMP _____ PVC _____ Weight <u>31.66</u> lbs./ft.<br>Dia. <u>16</u> in. to <u>183</u> ft. depth Wall Thickness _____ inches or<br>Dia. _____ in. to _____ ft. depth gage No. <u>.188</u>  |                                       | 10. Screen: Manufacturer's name _____<br><b>W. A. Brown</b><br>Type <u>17</u> Dia. <u>16</u><br>Slot/gauze <u>.125</u> Length <u>150</u><br>Set between <u>33</u> ft. and <u>183</u> ft.<br>_____ ft. and _____ ft.<br>Gravel pack? <u>yes</u> Size range of material <u>1/2 down</u>   |  |
|   |  |                        |   | 11. Static water level: _____ mo./day/yr.<br><u>16</u> ft. below land surface Date <u>4-13-79</u>  |                                       | 12. Pumping level below land surfaces:<br><u>170</u> ft. after <u>5</u> hrs. pumping <u>700</u> g.p.m.<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>Estimated maximum yield <u>700</u> g.p.m.  |  |
|   |  |                        |   | 13. Water sample submitted: _____ mo./day/yr.<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____  |                                       | 14. Well head completion:<br><input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> _____ Inches above grade  |  |
|   |  |                        |   | 15. Well grouted? <u>yes</u><br>With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete<br>Depth: From <u>0</u> ft. to <u>10</u> ft.  |                                       | 16. Nearest source of possible contamination: <u>field</u><br>ft. _____ Direction _____ Type _____<br>Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No  |  |
|   |  |                        |   | 17. Pump: _____ Not installed<br>Manufacturer's name <u>Goulds</u><br>Model number <u>10JHC</u> HP <u>60</u> Volts _____<br>Length of drop pipe <u>170</u> ft. capacity <u>700</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 |                                       | 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><b>Ace-Hi International 190</b><br>Business name _____ License No. _____<br>Address <b>Bodge City, Kansas 67801</b><br>Signed <u>Carl G. Tuttle</u> Date <u>4-13-79</u><br>Authorized representative |  |
| 18. Elevation:<br><u>2522</u><br>Topography: <u>TM</u><br><input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley |  |                        |   | 19. Remarks:<br><u>2522</u><br><u>16</u><br><u>2506</u><br><u>TOPO 2522</u><br><u>TM</u>   |                                       |   |  |

T 30 R 26 S 33 Sec 33