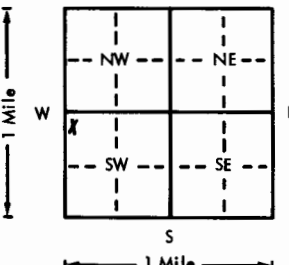


USE **INK** WRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 MEADE		Fraction NW NW SW 1/4 1/4 1/4		Section number 15	Township number 30 S	Range number 27 E/W
2. Distance and direction from nearest town or city: 4 MI WEST, ON 98th. - 3 MI NORTH				3. Owner of well: LYMAN PAUGETT R.R. or street: City, state, zip code: FALLER KS 67844		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 26 in. Completion date 5-10-76 Well depth 406 ft.		
				7. 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		
5. Type and color of material				From	To	
TOP SOIL & CLAY				0	20	
CLAY & SAND				20	40	
CLAY				40	60	
CLAY				60	80	
CLAY & FINE SAND STKS				80	100	
CLAY & FINE SAND STKS				100	120	
FINE SAND & CLAY STKS				120	140	
FINE TO MED TO COARSE SAND & GRAVEL				140	160	
FINE SAND & CLAY STKS				160	180	
FINE SAND & CLAY STKS				180	200	
MED SAND & CLAY STKS				200	220	
MED TO COARSE SAND & GRAVEL				220	240	
MED TO COARSE SAND & GRAVEL				240	260	
COARSE SAND & GRAVEL & CLAY STKS				260	280	
COARSE SAND & GRAVEL & CLAY STKS				280	300	
(Use a second sheet if needed)						
18. Elevation:		19. Remarks: Top to be completed by customer		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. Allen + Rawlins 322 Business name License No. Address Box 130 Meade Kan Signed Albert Rawlins Date 5-15-76 Authorized representative		
Topography: <input checked="" type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5