

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

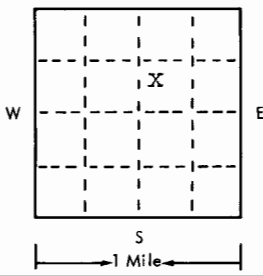
T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

Norman #1-9

Inv # 10946

1 Location of well:	County <b>Meade</b>	Township name	Fraction <b>SE NW</b>	Section number <b>9</b>	Town number <b>31S</b>	Range number <b>27W</b>
Distance and direction from nearest town or city: <b>4 miles west of Fowler, Ks.</b>				3 Owner of well: <b>Rains &amp; Williamson Oil Co. Rig #1 435 Page Court, 220 West Douglas Wichita, Kansas 67202</b>		
Street address of well location if in city:				Address:		
Locate with "X" in section below: N  W E S 1 Mile				Sketch map:		
2 Type and color of material				From	To	4 Well depth: <b>240</b> ft. Date of completion <b>1-7-75</b> Well diameter <b>9</b> in.
Surface				0	2	5 <input type="checkbox"/> 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
Tan Clay				2	45	6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> <u>Oil Well</u>
Gray Clay				45	70	7 Casing: Material <b>PVC</b> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. Diam. Weight <b>2.78</b> lbs./ft. <b>5 1/2</b> in. to <b>210</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>5 1/2</b> in. to <b>240</b> ft. depth
Blue Clay				70	105	8 Screen: Manufacturer <b>WESCO</b> Type <b>PVC</b> Dia. <b>5 1/2</b> " Slot/gauze <b>1303</b> Length <b>10</b> Set between <b>210</b> ft. and <b>220</b> ft. Fittings: <b>1/8 - 3/16</b> Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material
Brown clay				105	148	9 Static water level: <b>20</b> ft. below land surface Date <b>1-7-75</b>
Large sand w/clay streaks 80-20				148	180	10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <b>60</b> g.p.m.
Clay & Caliche w/small gravel				180	200	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date
Medium to large sand & clay streaks 90-10				200	220	12 Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> <b>12</b> Inches above grade
Medium to orange small gravel w/caliche streaks 50-40-10				220	240	13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From <b>0</b> ft. to <b>10</b> ft.
<i>Carlile has been contacted to plug this water well. By written com. from Juanita Green of Rains &amp; Williamson Oil Co., Inc. received on 5/7/75 5/7/75 DUB</i>				14 Nearest source of possible contamination: ft. <b>100</b> Direction <b>SW</b> Type <b>Oil Well</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.m.p. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
				16 Remarks: elevation  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		
(use a second sheet if needed)				17 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. <b>Carlile Water Well 118</b> Business name License No. Address <b>Box 275, Liberal, Ks.</b> Signed <b>Edward E. Means</b> Date <b>1-17-75</b> Authorized representative		

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5