

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

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

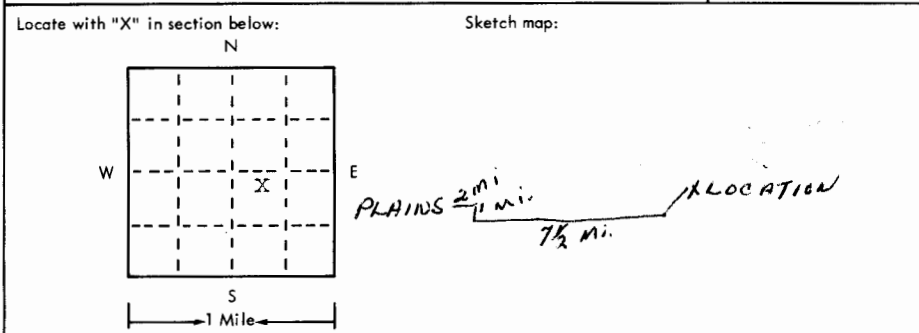
WATER WELL RECORD
KSA 82a-1201-1215

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

Sanders #2-23 Invoice No. 11019

1 Location of well:	County Meade	Township name	Fraction C-NW-SE	Section number 23	Town number 32S	Range number 29W
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Distance and direction from nearest town or city: **2 miles east of Plains** Owner of well: **Sage Drilling Company Rig #2**
1 south, 7 1/2 east, 1/2 NE Location. Address: **500 Biting Bldg. Wichita, Kansas 67202**
 Street address of well location if in city:



4 Well depth: 240 ft. Date of completion 1-30-75
Well diameter 9 in.

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored Reverse rotary

6 Use: Domestic Public supply Industry
 Irrigation Air conditioning Commercial
 Test well Oil Well

7 Casing: Material PVC Height: above/below
Threaded Welded Surface 12 in.
Diam. _____ Weight _____ lbs./ft. _____
5 1/2 in. to 190 ft. depth Drive shoe? Yes No
2 1/2 in. to 240 ft. depth!

2	Type and color of material	From	To
	Surface	0	2
	Sand and gravel	3	19
	Caliche, clay and gravel	19	48
	Sand and gravel	48	66
	Caliche and brown clay with gravel	66	87
	Sand and gravel	87	199
	Sand, gravel with clay streaks	199	240
	<i>Well Given to Landowner.</i>		
	<i>Jack T. Sanders</i>		
	<i>Box 117</i>		
	<i>Meade, Kansas 6/2/75</i>		
	<i>6/4/75 Dub</i>		
	(use a second sheet if needed)		

8 Screen:
Manufacturer Wesco
Type PVC Dia. 5 1/2
Slot/gauze .030 Length 10
Set between 190 ft. and 200 ft.
Fittings: 3/8 - 3/16
Gravel pack Yes No Size range of material _____

9 Static water level:
120 ft. below land surface Date 1-30-75

10 Pumping level below land surfaces:
_____ ft. after _____ hrs. pumping _____ g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield 50 g.p.m.

11 Water sample submitted:
 Yes No Date _____

12 Well head completion:
 Pitless adapter 12 Inches above grade

13 Well grouted? Yes No
 Neat cement Bentonite _____
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:
ft. SW Direction 100' Type Oil Well
Well disinfected upon completion? Yes No

15 Pump: Not installed
Manufacturer's name _____
Model number _____ HP _____ Volts _____
Length of drop pipe _____ ft. capacity _____ g.m.p.
Type:
 Submersible Turbine
 Jet Reciprocating
 Centrifugal Other

16 Remarks: elevation

Topography:
 Hill
 Slope
 Upland
 Valley

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.
Carlile Water Well 118
Business name _____ License No. _____
Address Box 275, Liberal, Kansas
Signed [Signature] Date 2-5-75
Authorized representative