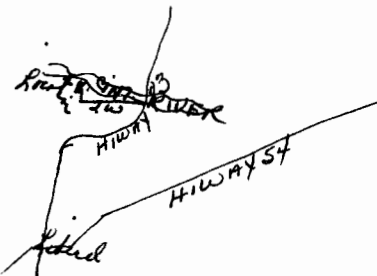


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

CWW Inv. #12372

1. Location of well: County <u>Seward</u>		Fraction <u>NE 1/4 NE 1/4 NE 1/4</u>		Section number <u>33</u>	Township number <u>T 32 S R 33 E/W</u>	Range number <u>33</u>
2. Distance and direction from nearest town or city: <u>13 miles north of Liberal, 2 west, 1 North</u> Street address of well location if in city:				3. Owner of well: <u>B. H. Lemert & Sons Ranch</u> R.R. or street: <u>1821 N. Calhoun</u> City, state, zip code: <u>Liberal, Kansas 67901</u>		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 		6. Bore hole dia. <u>28</u> in. Completion date <u>6-7-76</u> Well depth <u>185</u> ft.		
5. Type and color of material		From	To	7. <input checked="" 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		
Surface		0	2	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
Medium to large sand & sandy clay 90--10		2	180	9. Casing: Material <input type="checkbox"/> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>37</u> lbs./ft. Dia. <u>16</u> in. to <u>20</u> ft. depth Wall Thickness: inches or Dia. <u>16</u> in. to <u>85</u> ft. depth gage No. <u>219</u>		
Medium to large sand & sandy clay 70-30		180	185	10. Screen: Manufacturer's name <u>Free Flo Screen</u> Type <u>Steel</u> Dia. <u>16"</u> Slot/gauze <u>3/32</u> Length <u>160</u> Set between <u>20</u> ft. and <u>180</u> ft. ft. and ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>CMA</u>		
				11. Static water level: mo./day/yr. <u>20</u> ft. below land surface Date <u>6-7-76</u>		
				12. Pumping level below land surfaces: <u>28</u> ft. after <u>8</u> hrs. pumping <u>800</u> g.p.m. <u>30</u> ft. after <u>12</u> hrs. pumping <u>1000</u> g.p.m. Estimated maximum yield <u>2000</u> - <u>3000</u> g.p.m.		
				13. Water sample submitted: mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date		
				14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade		
				15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
				16. Nearest source of possible contamination: <u>None</u> ft. Direction Type Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Goulds</u> Motor <u>driven</u> Model number <u>DWT H10</u> HP <u>60</u> Volts Length of drop pipe <u>80</u> ft. capacity <u>800</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
		(Use a second sheet if needed)				
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks:				
		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. <u>Carlile Water Well</u> <u>118</u> Business name License No. Address <u>Box 275, Liberal, Ks.</u> Signed <u>Edward E. Means</u> Date <u>6-24</u> Authorized representative				

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

Form WWC-5