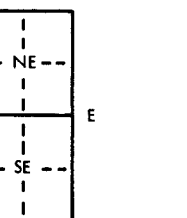


1. Location of well: <u>Morton</u>	County <u>NW 1/4 NW 1/4 SE 1/4</u>	Fraction <u>36</u>	Section number <u>T 32 S R 40 E</u>	Township number <u>32</u>	Range number <u>40</u>
2. Distance and direction from nearest town or city: <u>7 m - 1 E</u> Street address of well location if in city: <u>Rolla, Mo</u>			3. Owner of well: <u>Dean Myers</u> R.R. or street: <u>B. R.</u> City, state, zip code: <u>Rolla, Kansas 67954</u>		
4. Locate with "X" in section below: Sketch map: <div style="text-align: center;"></div>			6. Bore hole dia. <u>10</u> in. Completion date <u>4-22-</u> Well depth <u>160</u> ft.		
			7. Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
			8. Use: Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other <input type="checkbox"/>		
			9. Casing: Material <u>Plastic</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>1 1/2"</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>Sch 40</u> lbs./ft. Dia. <u>SMC 120</u> ft. depth Wall Thickness: inches or Dia. <u>in.</u> to <u>ft.</u> depth gage No. <u>.250</u>		
5. Type and color of material			10. Screen: Manufacturer's name <u>Slocum</u>		
			Type <u>saw cut</u> Dia. <u>5"</u>		
			Slot/gauze <u>1/8</u> Length <u>40'</u>		
			Set between <u>120</u> ft. and <u>160</u> ft.		
			Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8 - 1/4</u>		
			11. Static water level: _____ mo./day/yr. <u>72</u> ft. below land surface Date <u>4-22-77</u>		
			12. Pumping level below land surfaces: ? _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
			14. Well head completion: Pitless adapter _____ Inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> With: Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Depth: From <u>0</u> ft. to <u>10</u> ft.		
			16. Nearest source of possible contamination: ? ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. 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		
18. Elevation:			19. Remarks:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley			(Use a second sheet if needed)		
			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>Slocum Well Drilling 127</u> Business name License No. Address <u>Hogaton, Mo.</u> Signed <u>Paul Slocum</u> Date <u>6-1-77</u> Authorized representative		