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

WATER WELL RECORD
KSA 82a-1201-1215

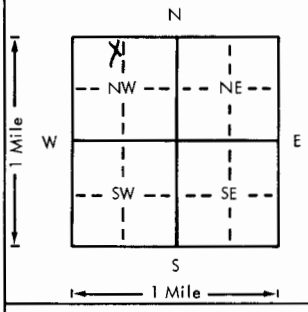
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

| 1. Location of well: | County | Fraction | Section number | Township number | Range number |
|---|---|---|---|---|---|
| | Barber | NE 1/4 NW 1/4 NW 1/4 | 21 | T 33 S | R 11 E/W |

2. Distance and direction from nearest town or city:
9-S 2-E 1-N of Medicine, Lodge, Kansas
Street address of well location if in city:
1-W 1-N of Jerlane, Ks.

3. Owner of well: Kewanee Oil Co.
R.R. or street: Box 360
City, state, zip code: Hoisington, Kansas

4. Locate with "X" in section below: Sketch map:




6. Bore hole dia. 10 in. Completion date _____
Well depth 36 ft. 5-8-75

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn X Oil field water __ Other

9. Casing: Material pvc
Threaded ____ Welded ____
RMP ____ PVC X
Dia. 6 in. to 36 ft. depth
Dia. ____ in. to ____ ft. depth
Height: Above or ~~Below~~ Surface 18 in.
Weight ____ lbs./ft.
Wall Thickness: inches or gage No. .280

| 5. Type and color of material | From | To |
|---|---|---|
| Sandy top soil | 0 | 2 |
| sand & gravel loose | 2 | 35 |
| red bed | 35 | 36 |
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| (Use a second sheet if needed) | | |

10. Screen: Manufacturer's name CertainTeed
Type pvc Dia. ____
Slot/~~gauze~~ 1/16 Length 16
Set between 20 ft. and 36 ft.
____ ft. and ____ ft.
Gravel pack? X Size range of material 3/4 3/8

11. Static water level: mo./day/yr.
8 ft. below land surface Date 5-8-75

12. Pumping level below land surfaces:
16 ft. after 1 hrs. pumping 80 g.p.m.
____ ft. after ____ hrs. pumping ____ g.p.m.
Estimated maximum yield ____ g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes X No Date ____

14. Well head completion:
__ Pitless adapter ____ Inches above grade

15. Well grouted? X
With: X Neat cement ____ Bentonite ____ Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination:
ft. 900 Direction west Type oilwell
Well disinfected upon completion? X Yes ____ No

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

18. Elevation:

Topography:
__ Hill
__ Slope
X Upland
__ 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.
Rosencrantz-Bemis 134
Business name License No.
Address Great Bend, Kansas 67530
X Signed S. Kilgore Date 6-19-77
Authorized representative

Sec 21 T 33 R 11 E/W 1/4 1/4 1/4 1/4 NE NW NW

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

Form WWC-5

MI-1023