

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

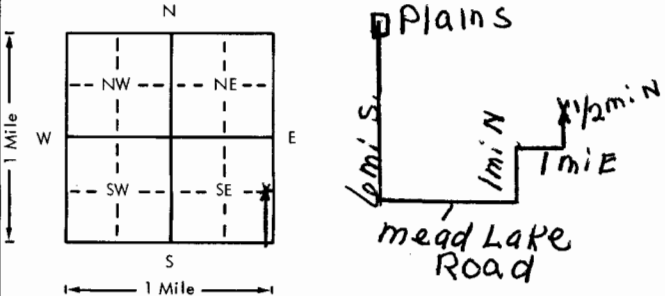
WATER WELL RECORD
KSA 82a-1201-1215

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

Permit No T 79-137

CWW16168

Cathall #1

1. Location of well:	County Meade	Fraction NE 1/4 SE 1/4 SE 1/4	Section number 9	Township number T 33 S	Range number R 29 E/W
2. Distance and direction from nearest town or city: From Plains go 6mi south 4 miles East 1mi North 1mi East 1/2mi back north to location			3. Owner of well: Sage Drilling Company R.R. or street: 222 Sutton Place City, state, zip code: Wichita, Kansas 67202		
4. Locate with "X" in section below: 			6. Bore hole dia. 9 in. Completion date 8-22-79 Well depth 240 ft.		
			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		
			8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other		
			9. Casing: Material <input type="checkbox"/> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 28 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 2.56 lbs./ft. Dia. 5 in. to 160 depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. .278		
5. Type and color of material			From	To	10. Screen: Manufacturer's name <input type="checkbox"/>
Surface			0	2	Type Sawed Dia. 5"
Fine sand & medium to large sand			2	71	Slot/gauze .030 Length 80
Clay			71	74	Set between 160 ft. and 240 ft.
Fine sand & medium to large sand			74	232	Gravel pack? Yes Size range of material 1/8-3/16
Blue clay			232	240	11. Static water level: <input type="checkbox"/> mo./day/yr. 59 ft. below land surface Date 8-22-79
					12. Pumping level below land surfaces: ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 60 g.p.m.
					13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>
					14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 28 Inches above grade
					15. Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.
					16. Nearest source of possible contamination: ft. 100 Direction N.E. Type Oil well Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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
(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. Carlile Water Well Service Business name <input type="checkbox"/> License No. <input type="checkbox"/> Address Box AA Liberal, Kansas Signed Edward E. Meane Date 8-31-79 Authorized representative		

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

Form WWC-5