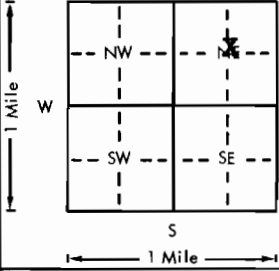


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 <b>Meade</b>	Fraction <b>C of 4 NE 1/4 NE 1/4</b>	Section number <b>19</b>	Township number <b>T 33 S</b>	Range number <b>R 30W E/W</b>
2. Distance and direction from nearest town or city: <b>6 south and 2 west</b> Street address of well location if in city:			3. Owner of well: <b>Da Mac Drilling</b> R.R. or street: <b>Box 1164</b> City, state, zip code: <b>Great Bend, Kansas 67530</b>		
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. <b>9 7/8</b> in. Completion date <b>11-18-77</b> Well depth <b>312</b> ft.		
5. Type and color of material			7. <input 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 <b>PVC</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>2.8</b> lbs./ft. Dia. <b>5</b> in. to <b>312</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gage No. <b>265</b>		
			10. Screen: Manufacturer's name <b>Jess &amp; Lowell</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/gauge <b>1/8"</b> Length <b>80'</b> Set between <b>232</b> ft. and <b>312</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <b>Yes</b> Size range of material <b>1/64-5/32</b>		
			11. Static water level: <input type="checkbox"/> mo./day/yr. <b>168</b> ft. below land surface Date <b>11/18/77</b>		
(Use a second sheet if needed)			12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>50*</b> g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
			14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>14</b> ft.		
			16. Nearest source of possible contamination: ft. <b>200</b> Direction <b>east</b> Type <b>oil well</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(Use a second sheet if needed)			17. Pump <b>Customer will</b> Not installed Manufacturer's name <b>complete well</b> 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		
			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. <b>Friesen Windmill</b> <b>252</b> Business name License No. Address <b>Meade, Kansas 67864</b> Signed <b>[Signature]</b> Date <b>12-21-77</b> Authorized representative		
			18. Elevation:		
			19. Remarks:		
			Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		