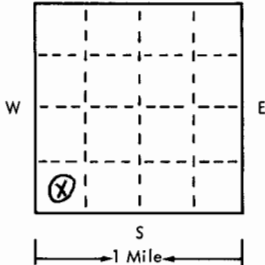
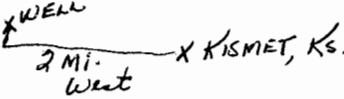


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

1 Location of well:	County <b>Seward</b>	Township name	Fraction <b>SW-SW</b>	Section number <b>6</b>	Town number <b>33S</b>	Range number <b>31W</b>
Distance and direction from nearest town or city: <b>2 miles west of Kismet, Kansas</b>				3 Owner of well: <b>Service Drilling Company</b> Address: <b>Box 910 Borger, Texas 79007</b>		
Locate with "X" in section below: 				Sketch map: 		
2				4 Well depth: <b>300</b> ft. Date of completion <b>11-22-74</b> Well diameter <b>9</b> in.		
Type and color of material				5 <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		
Surface				6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> <b>Oil Rig</b>		
Brown clay and sand				7 Casing: Material <b>PVC</b> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. Diam. Weight <b>2.78</b> lbs./ft. <b>5/8</b> in. to <b>250</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth		
Caliche <del>clay</del> clay and sand				8 Screen: Manufacturer <b>WESCO</b> Type <b>PVC</b> Dia. <b>5 1/2"</b> Slot/gauze <b>.030</b> Length <b>50</b> Set between <b>250</b> ft. and <b>300</b> ft. Fittings: <b>1/8 - 3/16</b> Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____		
Brown clay				9 Static water level: <b>195</b> ft. below land surface Date <b>11-22-74</b>		
Medium sand and gravel				10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>50</b> g.p.m.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				12 Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade		
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite _____ Depth: From <b>0</b> ft. to <b>10</b> ft.		
				14 Nearest source of possible contamination: ft. <b>100</b> Direction <b>southwest</b> type <b>Oilwell</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				15 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		
16 Remarks: elevation				17 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>Carlile Water Well 118</b> Business name _____ License No. _____ Address <b>Box 275, Liberal, Ks.</b> Signed <b>Edward C. Means</b> Date <b>11-26-74</b> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley				(use a second sheet if needed)		

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5