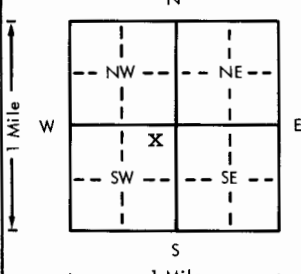
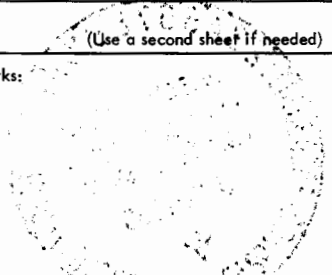


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Seward	Fraction NE 1/4 NE 1/4 SW 1/4	Section number 12	Township number T 33S	Range number S R 31W E/W
2. Distance and direction from nearest town or city: From So. edge of Kismet go 2 1/2 E, 3/4 So., 1/2 E. & 1/4 N. Street address of well location if in city:			3. Owner of well: Dekalb Swine Breeders, Inc. R.R. or street: Box 614 City, state, zip code: Plains, Kansas 67869		
4. Locate with "X" in section below: N  W E S 1 Mile 1 Mile			Sketch map: SW 1/4, Sec. 12, T33S, R31W, Seward County, Kansas		
5. Type and color of material			From	To	6. Bore hole dia. <u>28</u> in. Completion date _____ Well depth <u>445</u> ft. <u>3-23-78</u>
Fine sand			0	18	7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary
Fine sand, clay streaks			18	40	8. Use: <input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Public supply <input checked="" type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
Tan clay			40	70	9. Casing: Material <u>Steel</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>62.5</u> lbs./ft. Dia. <u>16</u> in. to <u>225</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>375</u>
Tan & Red clay			70	92	10. Screen: Manufacturer's name <u>Doerr,</u> <u>Foster, Louver</u> Type <u>Millslot</u> Dia. <u>16</u> Slot/gauze <u>1/8</u> Length <u>220</u> Set between <u>225</u> ft. and <u>445</u> ft. _____ ft. and _____ ft. Gravel pack? <input type="checkbox"/> Size range of material <u>3.22mm</u>
Fine to medium sand (loose) clay streaks			92	157	11. Static water level: _____ mo./day/yr. <u>197</u> ft. below land surface Date <u>1-31-78</u>
Mixed colored clay			157	168	12. Pumping level below land surfaces: <u>210</u> ft. after <u>1</u> hrs. pumping <u>1040</u> g.p.m. <u>224</u> ft. after <u>1 1/2</u> hrs. pumping <u>2070</u> g.p.m. Estimated maximum yield _____ g.p.m.
Fine to medium sand (loose)			168	192	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____
Tan clay, sand streaks			192	198	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade
Fine to med. sand (loose), clay streaks			198	310	15. Well grouted? <u>Yes</u> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>100</u> ft.
Sandy Blue clay			310	334	16. Nearest source of possible contamination: ft. _____ Direction _____ Type <u>Unknown</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Fine sand, clay streaks (loose)			334	445	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
Fine sand, clay streaks (little dirty)			445	510	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>Layne-Western Co. Inc.</u> <u>102</u> Business name _____ License No. _____ Address <u>Box 686 Garden City</u> Signed <u>R.L. Vincent</u> Date <u>78 Apr 78</u> Authorized representative
Fine sandy Red Bed			510	540	
(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: 				

33
310
12
NE NE SW
1/4 1/4 1/4

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

Form WWC-5