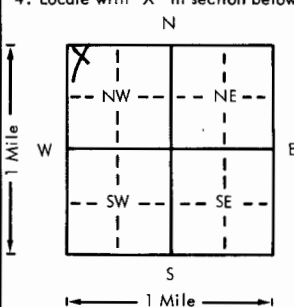


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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: <b>SEWARD</b>		County	Fraction <b>NW 1/4 NW 1/4 NW 1/4</b>	Section number <b>17</b>	Township number <b>T 33 S R 34 E/W</b>	Range number
2. Distance and direction from nearest town or city: <b>8 miles N. 7 miles west of LIBERAL</b>				3. Owner of well: <b>HITCH LAND &amp; CATTLE</b> R.R. or street: <b>Box 1576</b> City, state, zip code: <b>Liberal, KS 67901</b>		
4. Locate with "X" in section below: 				Sketch map:		
5. Type and color of material				From	To	6. Bore hole dia. <u>26</u> in. Completion date <b>8-24-79</b> Well depth <u>553</u> ft.
<b>Top soil</b>				<b>0</b>	<b>240</b>	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
<b>Fine &amp; med sand w/clay</b>				<b>240</b>	<b>400</b>	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input 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
<b>Med &amp; coarse sand</b>				<b>400</b>	<b>545</b>	9. Casing: Material <b>Steel</b> 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>42.5</u> lbs./ft. Dia. <u>16</u> in. to <u>553</u> ft. depth Wall Thickness, inches or Dia. <u>   </u> in. to <u>   </u> ft. depth gage No. <u>.250</u>
<b>Red clay</b>				<b>545</b>	<b>560</b>	10. Screen: Manufacturer's name Type <b>Steel</b> Dia. <b>16"</b> Slot/gauze <b>1/8</b> Length <b>3</b> Set between <b>500</b> ft. and <b>540</b> ft. <u>   </u> ft. and <u>   </u> ft. Gravel pack? <input checked="" type="checkbox"/> <b>yes</b> Size range of material <b>1/8-1/4</b>
						11. Static water level: <u>125</u> ft. below land surface Date <b>8/28/79</b> mo./day/yr.
						12. Pumping level below land surfaces: <u>   </u> ft. after <u>   </u> hrs. pumping <u>   </u> g.p.m. <u>   </u> ft. after <u>   </u> hrs. pumping <u>   </u> g.p.m. Estimated maximum yield <u>   </u> g.p.m.
						13. Water sample submitted: <u>   </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u>   </u>
						14. Well head completion: <b>NA</b> <input type="checkbox"/> Pitless adapter <u>   </u> inches above grade
						15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.
						16. Nearest source of possible contamination: ft. <u>   </u> Direction <u>   </u> Type <u>   </u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
						17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u>   </u> Model number <u>   </u> HP <u>   </u> Volts <u>   </u> Length of drop pipe <u>   </u> ft. capacity <u>   </u> 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:	19. Remarks:		20. Water well contractor's certification:			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	<b>PERF. 235'-500'</b> <b>540'-553'</b>  <b>16. Cropland</b>		<b>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.</b> <b>KTM DRILLING, INC. 225</b> Business name <u>   </u> License No. <u>   </u> Address <b>Box 1388 Gayman, OK</b> Signed <u>Clayton</u> Date <b>8/28/79</b> Authorized representative			

T 33 S R 34 E 17  
 Sec 17  
 1/4 1/4 1/4  
 NNNNNNN

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

Form WWC-5