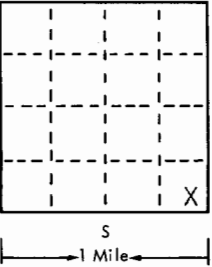


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

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

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

County <b>Stevens</b>		Township name <b>SE 1/4 SE 1/4 SE 1/4</b>		Section number <b>1</b>		Range number <b>T 33 S</b>		Range number <b>R 35 W</b>	
Distance and direction from nearest town or city: <b>15 miles East</b>				3 Owner of well: <b>Dave Cline</b>					
Street address of well location if in city: <b>2 North of Hugoton, Ks.</b>				Address: <b>Guymon, Okla.</b>					
Locate with "X" in section below: <div style="text-align: center;"></div>				Sketch map:		4 Well depth: <b>500</b> ft. Date of completion: <b>3-21-75</b> Well diameter: <b>28</b> in.			
				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					
				6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>					
				7 Casing: Material <b>Steel</b> Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. Diam. <b>16"</b> Weight _____ lbs./ft. <b>219</b> in. to <b>500</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth					
				8 Screen: <b>Perforation</b> Manufacturer <b>W.A. Brown</b> Type <b>6% free flow</b> <b>16"</b> Slot/gauze <b>178</b> Length <b>2"</b> Set between <b>240</b> ft. and <b>500</b> ft. Fittings: <b>50% #1 50% 1/2"</b> Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____					
				9 Static water level: <b>130</b> ft. below land surface Date <b>3/20/75</b>					
				10 Pumping level below land surfaces: <b>193</b> ft. after <b>5</b> hrs. pumping <b>6300</b> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>2000</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 <input type="checkbox"/> Depth: From _____ ft. to _____ ft.					
				14 Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No					
				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Worthington</b> Model number <b>8" 12M90HP</b> _____ Volts _____ Length of drop pipe <b>440</b> ft. capacity <b>1800</b> g.m.p. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other					
				16 Remarks: elevation  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					
				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>Jones Drlg Co.</b> <b>257</b> Business name License No. Address <b>P.O. Box 187 Liberal,</b> Signed <b>J.B. Cline</b> Date <b>4-1-75</b> Authorized representative					