

USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
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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<br><b>STEVENS</b> | Fraction<br><b>NE 1/4 NE 1/4 NE 1/4</b>   | Section number<br><b>13</b> | Township number<br><b>T 33 S</b> | Range number<br><b>R 36 E</b> |
| 2. Distance and direction from nearest town or city:<br><b>9E of Hugoton</b><br>Street address of well location if in city:   |  |                          | 3. Owner of well: <b>DOUG MILLS</b><br>R.R. or street:<br><b>Hugoton, Kansas</b><br>City, state, zip code:  |                             |                                  |                               |
| 4. Locate with "X" in section below:<br>N<br>W<br>E<br>S<br>1 Mile<br>1 Mile  |  |                          | Sketch map:<br><br>6. Bore hole dia. <b>26</b> in. Completion date <b>4-2-83</b><br>Well depth <b>682</b> ft.   |                             |                                  |                               |
| 5. Type and color of material   |  |                          | 7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><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<br><input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other  |                             |                                  |                               |
|   |  |                          | 9. Casing: Material <b>Steel</b> Height: Above or below<br>Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in.<br>RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>42.5</b> lbs./ft.<br>Dia. <b>16</b> n. to <b>682</b> ft. depth Wall Thickness: inches or<br>Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>.250</b>   |                             |                                  |                               |
|   |  |                          | 10. Screen: Manufacturer's name<br>Type <b>Steel</b> Dia. <b>16"</b><br>Slot/gauze <b>1/8</b> Length <b>864 3</b><br>Set between <b>632</b> ft. and <b>682</b> ft.<br><b>260-632</b> ft. and <input type="checkbox"/> ft.<br>Gravel pack? <b>yes</b> size range of material <b>1/8-1/4</b>  |                             |                                  |                               |
|   |  |                          | 11. Static water level: <input type="checkbox"/> mo./day/yr.<br><b>129</b> ft. below land surface Date <b>4-18-83</b>   |                             |                                  |                               |
| (Use a second sheet if needed)  |  |                          | 12. Pumping level below land surfaces: <b>n/a</b><br><input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m.<br><input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m.<br>Estimated maximum yield <input type="checkbox"/> g.p.m.  |                             |                                  |                               |
|   |  |                          | 13. Water sample submitted: <input type="checkbox"/> mo./day/yr.<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>   |                             |                                  |                               |
|   |  |                          | 14. Well head completion: <b>n/a</b><br><input type="checkbox"/> Pitless adapter <b>24</b> inches above grade   |                             |                                  |                               |
|   |  |                          | 15. Well grouted? <b>yes</b><br>With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete<br>Depth: From <input type="checkbox"/> ft. to <b>10</b> ft.   |                             |                                  |                               |
|   |  |                          | 16. Nearest source of possible contamination:<br>ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/><br>Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |                             |                                  |                               |
| 18. Elevation:<br>Topography:<br><input checked="" type="checkbox"/> Hill<br><input type="checkbox"/> Slope<br><input type="checkbox"/> Upland<br><input type="checkbox"/> Valley |  |                          | 17. Pump: <input checked="" type="checkbox"/> Not installed<br>Manufacturer's name<br>Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/><br>Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> g.p.m.<br>Type:<br><input type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |                             |                                  |                               |
|   |  |                          | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report<br>is true to the best of my knowledge and belief.<br><b>KTM DRILLING, INC. 225</b><br>Business name<br>Address <b>Box 1385, Borman, OK</b><br>Signed <b>[Signature]</b> Date <b>7-12-83</b><br>Authorized representative   |                             |                                  |                               |
|   |  |                          | 19. Remarks:<br><b>16. Cropland</b><br><b>Perf. 260-632</b>   |                             |                                  |                               |
|   |  |                          | 21. (Use a second sheet if needed)  |                             |                                  |                               |
|   |  |                          | 22. (Use a second sheet if needed)  |                             |                                  |                               |