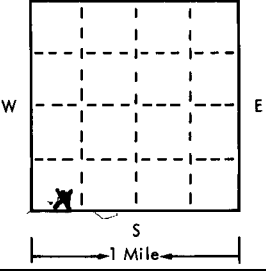


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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

1 Location of well: County <u>STEVENS</u> <u>Seward</u>		Township name		Fraction <u>5 5/8 1/4 1/4 1/4</u>	Section number <u>12</u>	Town number <u>34</u>	Range number <u>35</u>		
Distance and direction from nearest town or city: <u>14 EAST</u> <u>5 S of Hugoton</u>					3 Owner of well: <u>Milton Borsell</u> <u>Route 1 Box 47</u> <u>Hugoton Kan</u>				
Locate with "X" in section below: N  W E S 1 Mile					Sketch map:				
2 Type and color of material					From	To	4 Well depth: <u>622</u> ft. Date of completion <u>3/4/76</u> Well diameter <u>26</u> in.		
					Overburden		0	2	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
					Top Soil		2	200	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
					Sand & Clay		200	280	7 Casing: Material <u>Steel</u> Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. Diam. <u>16</u> in. to <u>622</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No <u>16</u> in. to <u>622</u> ft. depth
					Sand & Clay Strks.		280	381	8 Screen: Manufacturer <u>L.B. Foster</u> Type <u>Steel</u> Dia. <u>16"</u> Slot/gauze <u>1/8</u> Length <u>3355</u> Set between <u>248</u> ft. and <u>600</u> ft. Fittings: <u>600</u> <u>622</u> Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1/8 to 1/4</u>
					Med. Sand		381	538	9 Static water level: <u>122</u> ft. below land surface Date <u>3/4/76</u>
					Med. Sand		538	695	10 Pumping level below land surfaces: <u>NA</u> ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.
					Clay Strks. & Bed Bed		695	726	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____
									12 Well head completion: <input type="checkbox"/> Pitless adapter <u>NA</u> <input type="checkbox"/> 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 <u>0</u> ft. to <u>10</u> ft.
				14 Nearest source of possible contamination: ft. ____ Direction ____ Type ____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.p.m. Type: <u>Pump Set by Third Party</u> <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 <u>8A Johnson FRQ</u> <u>Steel 16"</u> <u>1000 Slot</u> <u>600-620</u> <u>14 Crop Land</u>					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. <u>KTM DRILLING, INC.</u> <u>225</u> Business name <u>Box 385, Guymon, Okla.</u> License No. ____ Address <u>Guymon, Okla.</u> Signed <u>[Signature]</u> Date <u>3/4/76</u> Authorized representative				