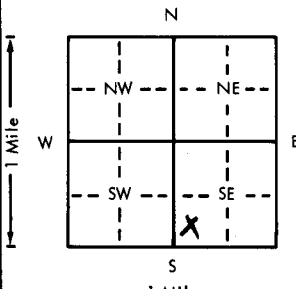


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 REPUBLIC	Fraction SW 1/4 SW 1/4 SE 1/4	Section number 35	Township number T 3 S	Range number R 1 E																																																																																										
2. Distance and direction from nearest town or city: 1 E 2 N Street address of well location if in city: 1/2 E AGENDA		3. Owner of well: DON KALINODA R.R. or street: R ROUTE City, state, zip code: AGENDA, KANS 66930																																																																																														
4. Locate with "X" in section below: 		Sketch map: <table border="1"><tr><td>6. Bore hole dia. 8 in.</td><td>Completion date 9-9-77</td></tr><tr><td>Well depth 200 ft.</td><td></td></tr><tr><td>7. Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug</td><td></td></tr><tr><td><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary</td><td></td></tr><tr><td>8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry</td><td></td></tr><tr><td><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock</td><td></td></tr><tr><td><input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other</td><td></td></tr><tr><td>9. 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YES</td></tr><tr><td colspan="2">With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete</td></tr><tr><td colspan="2">Depth: From 0 ft. to 3 ft.</td></tr><tr><td colspan="2">16. Nearest source of possible contamination:</td></tr><tr><td colspan="2">ft. 500 Direction WEST Type LOTS</td></tr><tr><td colspan="2">Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</td></tr><tr><td colspan="2">17. 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