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

WATER WELL RECORD
KSA 82a-1201-1215

CNA

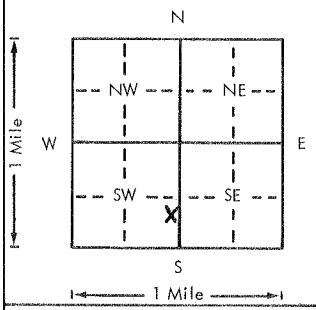
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Sheridan	N SE 1/4 SE 1/4 SW 1/4	12	T 7 S	R 27 E/W

2. Distance and direction from nearest town or city: Hoxie, KS
6½ Miles North; 8½ Miles East; 800' North
Street address of well location if in city:

3. Owner of well: Rex Mauck
R.R. or street:
City, state, zip code: Studley, Kansas

4. Locate with "X" in section below:



Sketch map:

5. Type and color of material	From	To
Soil & Sand	0	15
Clay	15	95
Sand & Gravel w/ Clay Layers	95	119
Sand & Gravel	119	155
Clay	155	180
Sand & Gravel	180	190
Ochre & Shale	190	200
BROCK 190		
(Use a second sheet if needed)		

6. Bore hole dia. 28 in. Completion date
Well depth 190 ft. 1-22-79

7. __ Cable tool __ Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored X Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
X Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material Steel Height: Above or below
Threaded ___ Welded X Surface 12 in.
RMP ___ PVC ___ Weight 3 lbs./ft.
Dia. 16 in. to 194 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. .204

10. Screen: Manufacturer's name Cook
Type Wire Wrapped Dia. 16"
Slot/gauze 100 Length 10'
Set between 180 ft. and 190 ft.
brown-perf120 ft. and 180 ft.
Gravel pack? ___ Size range of material 30%#1- 70% ¼x5

11. Static water level: mo./day/yr.
123 ft. below land surface Date 1-24-79

12. Pumping level below land surfaces:
145 ft. after 2 hrs. pumping 446 g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 590 g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes X No Date

14. Well head completion:
__ Pitless adapter 12 Inches above grade

15. Well grouted? X
With: __ Neat cement __ Bentonite X Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination:
ft. 2500 Direction [redacted] NW Type ON FARM
Well disinfected upon completion? ___ Yes ___ No

17. Pump: __ Not installed
Manufacturer's name Floway
Model number 10 DOH HP 70 Volts
Length of drop pipe 190 ft. capacity 500 g.p.m.
Type:
__ Submersible X Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

18. Elevation:

Topography:
__ Hill
__ Slope
X Upland
__ Valley

19. Remarks:

20. 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.
Business name Western Well & Pump, Inc. License No. 245
Address Box 852 Colby, KS 67701
Signed R D Calhoon Authorized representative Date 2-15-79

T 7 R 27 W Sec 12 1/4 1/4 1/4 1/4

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

Form WWC-5

MI-1023