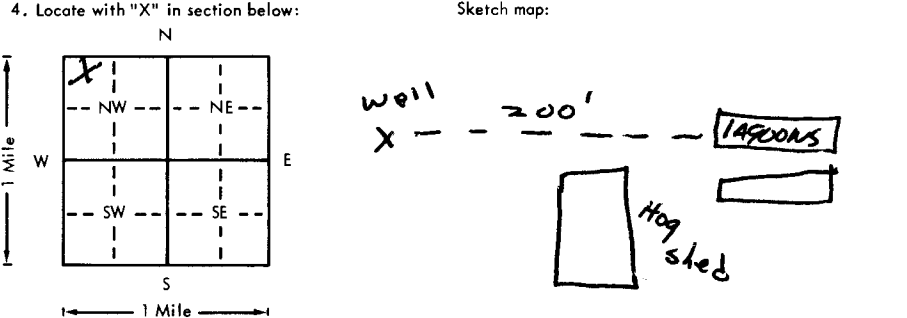


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Clay	Fraction NW 1/4 NW 1/4 NW 1/4	Section number 8	Township number T 10 S	Range number R 2 E
2. Distance and direction from nearest town or city: 4.5 E 2 N Street address of well location if in city: OF LONG FORD			3. Owner of well: JAMES HENRY R.R. or street: LONGFORD, KS City, state, zip code: 67458		
4. Locate with "X" in section below: 			6. Bore hole dia. 8 in. Completion date 7-13-78 Well depth 120 ft.		
			7. <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		
			8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
			9. Casing: Material PVC Height: above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 29 in. RMP PVC 92 Weight 2158 lbs./ft. Dia. 5 in. to 120 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 1274		
5. Type and color of material			10. Screen: Manufacturer's name PUMSCO MPE Type PVC Dia. 5 Slot/gauge 020 Length 40 Set between 60 ft. and 100 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 0.30x0.60		
			11. Static water level: 55 ft. below land surface Date 7-13-78		
			12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 30 g.p.m.		
			13. Water sample submitted: ____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date		
			14. Well head completion: CAP <input type="checkbox"/> Pitless adapter 29 Inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
			16. Nearest source of possible contamination: LAGOON ft. 200 Direction E Type LAGOON Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
			(Use a second sheet if needed)		
18. Elevation: Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: OWNER TO INSTALL IAB			
		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. STRADER DALG Co 182 Business name License No. Address Heilman KS Signed Dale Rubin Date 7-14-78 Authorized representative			

T 10 S R 2 E NW 1/4 NW 1/4 NW 1/4

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

Form WWC-5