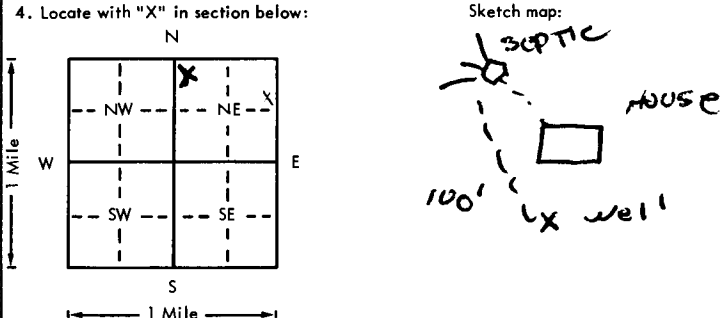


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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<br><b>WABAUNSEE</b>                  | Fraction<br><b>SE NE NE</b><br><del>NW 1/4 NW 1/4 NE 1/4</del>   | Section number<br><b>35</b>  | Township number<br><b>T 10</b> | Range number<br><b>S R 9</b> |
| 2. Distance and direction from nearest town or city:<br><b>1.5 W</b><br>Street address of well location if in city: <b>OF WAUBANSEE</b>  |  |   | 3. Owner of well: <b>LEONARD AMBROSE</b><br>R.R. or street: <b>RR</b><br>City, state, zip code: <b>Wamego, KS</b>  |  |                                |                              |
| 4. Locate with "X" in section below:<br>   |  |   | 6. Bore hole dia. <b>10</b> in. Completion date <b>5-27-77</b><br>Well depth <b>60</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 checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry<br><input 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>PVC</b> Height: <b>above</b> or below<br>Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>29</b> in.<br>RMP <input type="checkbox"/> PVC <b>9L</b> Weight <b>2.58</b> lbs./ft.<br>Dia. <b>5</b> in. to <b>60</b> ft. depth Wall Thickness: inches or<br>Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>258</b> |  |                                |                              |
|  |  |   | 10. Screen: Manufacturer's name <b>Pumped</b><br>Type <b>PVC</b> Dia. <b>5</b><br>Size/gauge <b>1020</b> Length <b>10</b><br>Set between <b>50</b> ft. and <b>60</b> ft.<br>ft. and ft.<br>Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1030x1060</b>  |  |                                |                              |
|  |  |   | 11. Static water level: <input type="checkbox"/> mo./day/yr.<br><b>32</b> ft. below land surface Date <b>5-27-77</b>   |  |                                |                              |
|  |  |   | 12. Pumping level below land surfaces:<br>ft. after hrs. pumping g.p.m.<br>ft. after hrs. pumping g.p.m.<br>Estimated maximum yield <b>50</b> g.p.m.   |  |                                |                              |
|  |  |   | 13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date   |  |                                |                              |
|  |  |   | 14. Well head completion: <b>CAP</b><br>Pitless adapter <b>24</b> Inches above grade   |  |                                |                              |
|  |  |   | 15. Well grouted? <input checked="" type="checkbox"/><br>With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete<br>Depth: From <b>0</b> ft. to <b>10</b> ft.   |  |                                |                              |
|  |  |   | 16. Nearest source of possible contamination:<br>ft. <b>100</b> Direction <b>NW</b> Type <b>SEPTIC</b><br>Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |  |                                |                              |
|  |  |   | 17. Pump: <input checked="" type="checkbox"/> Not installed<br>Manufacturer's name<br>Model number HP Volts<br>Length of drop pipe ft. capacity 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                 |  |                                |                              |
|  |  |   | (Use a second sheet if needed)   |  |                                |                              |
| 18. Elevation:<br><b>990'</b><br>Topography:<br><input type="checkbox"/> Hill<br><input type="checkbox"/> Slope<br><input checked="" type="checkbox"/> Upland<br><input type="checkbox"/> Valley |  | 19. Remarks:<br><b>OWNER TO INSTAL SLAB</b> |  | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.<br><b>STADLER DRILLING CO INC 182</b><br>Business name License No.<br>Address <b>RT1 HOLTAN KS</b><br>Signed <b>Dale Adam</b> Date <b>5-27-77</b><br>Authorized representative |                                |                              |