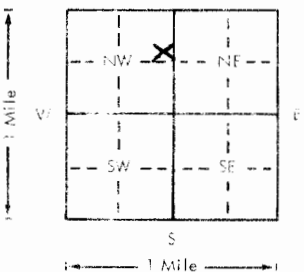
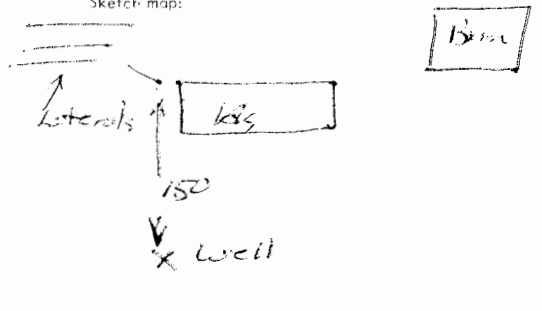


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 SHAWNEE	Fraction SE 1/4 NE 1/4 NW 1/4	Section number 17	Township number T 11 S R 15 EW	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city:		1 1/2 E 1/4 N Kiro		3. Owner of well: Monte Fuller R.R. or street: 2813 James City, state, zip code: Topeka, KS 66604		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 10 in. Completion date _____ Well depth 50 ft. 7-25-78		
				7. <input checked="" 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		
5. Type and color of material		From	To	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 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 _____ Welded _____ Surface 24 in. RMP _____ FVC Blue Weight 2.74 lbs./ft. Dia. 5 in. to 50 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 258		
				10. Screen: Manufacturer's name _____ Type PVC Dia. 5" Slot/gauge .220 Length 10 Set between 40 ft. and 50 ft. ft. and _____ ft. Gravel pack? yes Size, range of material 3/8/20		
				11. Static water level: _____ mo./day/yr. 25 ft. below land surface Date 7-25-78		
				12. Pumping level below land surfaces: Art. test _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 50 g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				14. Well head completion: Top cap <input checked="" type="checkbox"/> Pitless adapter 24 Inches above grade		
				15. Well grouted? yes 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: ft. 150 Direction N Type laterals Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name Jacuzzi Model number 554B HP 1/2 Volts 230 Length of drop pipe 45 ft. capacity 10 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: 910		19. Remarks: owner to install slab.		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. STRACK Dalg 182 Business name _____ License No. _____ Address ATI Heating, KS Signed Michael Strack Date 7-25-78 Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						