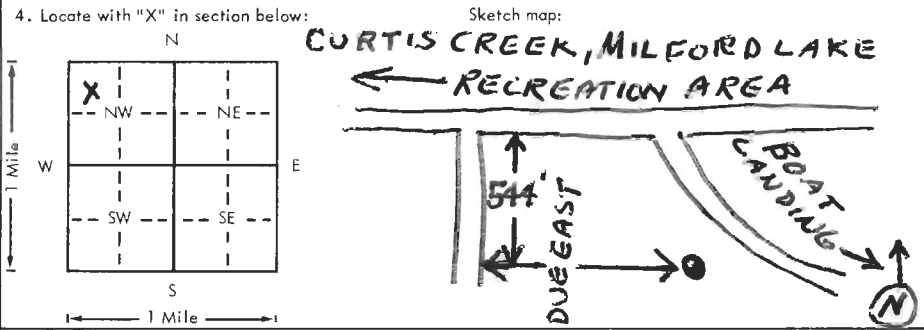


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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>GEARY</b> | Fraction<br><b>NW 1/4 NW 1/4 NW 1/4</b>  | Section number<br><b>29</b>  | Township number<br>T <b>11</b> S R <b>4 E</b> E/W | Range number |
| 2. Distance and direction from nearest town or city: <b>6 miles SE of Wakefield, KS</b>                                    |                        | 3. Owner of well: <b>US Government</b><br>R.R. or street: <b>Milford Lake, Junction City, Kansas</b><br>City, state, zip code: |  |   |              |
| 4. Locate with "X" in section below:<br> |                        |  | 6. Bore hole dia. <b>5 7/8"</b> Completion date <b>10 JAN 79</b><br>Well depth <b>134</b> ft.  |   |              |
| 5. Type and color of material  |                        |  | 7. <input 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 type="checkbox"/> Domestic <input checked="" 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   |   |              |
|  |                        |  | <input checked="" type="checkbox"/> Casing: Material <b>Steel</b> Height: Above or below<br>Threaded <input checked="" type="checkbox"/> Welded _____ Surface <b>12"</b> in.<br>RMP <input checked="" type="checkbox"/> PVC _____ Weight <b>19.2</b> lbs./ft.<br>Dia. <b>6 1/8</b> in. <input checked="" type="checkbox"/> 561 ft. depth Wall Thickness: inches or<br>Dia. _____ in. to _____ ft. depth gage No. <b>Q280</b> |   |              |
|  |                        |  | 10. Screen: Manufacturer's name<br><b>NONE INSTALLED</b><br>Type _____ Dia. _____<br>Slot/gauze _____ Length _____<br>Set between _____ ft. and _____ ft.<br>_____ ft. and _____ ft.<br>Gravel pack? _____ Size range of material _____  |   |              |
|  |                        |  | 11. Static water level: _____ mo./day/yr.<br><b>36.3</b> ft. below land surface Date <b>4/17/79</b>  |   |              |
|  |                        |  | 12. Pumping level below land surfaces:<br><b>36.7</b> ft. after <b>1/2</b> hrs. pumping <b>36.6</b> g.p.m.<br><b>38.6</b> ft. after <b>2</b> hrs. pumping <b>57</b> g.p.m.<br>Estimated maximum yield _____ g.p.m.   |   |              |
|  |                        |  | 13. Water sample submitted: _____ mo./day/yr.<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <b>1/11/79</b>   |   |              |
|  |                        |  | 14. Well head completion:<br><input type="checkbox"/> Pitless adapter _____ Inches above grade   |   |              |
|  |                        |  | 15. Well grouted? <b>yes</b><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>57</b> ft.  |   |              |
|  |                        |  | 16. Nearest source of possible contamination: <b>sewer</b><br>ft. <b>3000'</b> Direction <b>West</b> Type <b>lagoon</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 _____ 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                         |   |              |
|  |                        |  | 18. Elevation: <b>1190'</b><br>Topography:<br><input checked="" type="checkbox"/> Hill<br><input type="checkbox"/> Slope<br><input type="checkbox"/> Upland<br><input type="checkbox"/> Valley   |   |              |
| 19. Remarks:   |                        |  | <input checked="" type="checkbox"/> 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>US Corps of Engineers</b><br>Business name _____ License No. _____<br>Address <b>Fed. Bldg. 601 E. 12th</b><br>Signed <b>K.C. Mo. 64106</b> Date <b>10-29-79</b><br>Authorized representative                                |   |              |

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

Form WWC-5

T  
R  
W  
E  
2-7  
1/4  
1/4  
1/4  
1/4