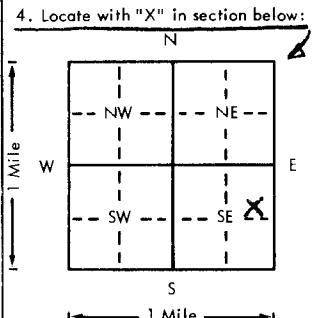


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Dickinson Fraction 9E 1/4 NE 1/4 SE 1/4 Section number 30 Township number T 12 S R 4 Range number 4 E/W	
2. Distance and direction from nearest town or city: in City of Chapman Ms. Street address of well location if in city: 206 W. 9th	
3. Owner of well: Lester Diehl or street: 206 W. 9th. City, state, zip code: Chapman Ks. 67431	
4. Locate with "X" in section below: Sketch map: 	
6. Bore hole dia. 8 in. Completion date Apr 9-78 Well depth 90 ft.	
7. <input checked="" type="checkbox"/> Cable tool <input 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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
9. Casing: Material Pist Height: Above or below Threaded <input type="checkbox"/> Welded Abie Surface 5' in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 90 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. Sch. 40	
5. Type and color of material	
	From To
Dirt Black	0 4
Lime Rock White	4 10
Clay White	10 20
Lime Rock White	20 25
Clay White	25 30
Lime Rock Yellow	30 45
Shale Blue	45 50
Lime Rock Gray	50 65
Shale Blue	65 75
Lime Rock yellow + Porus	75 90
10. Screen: Manufacturer's name PUMPRO Type PVC Dia. 5" Slot/gauze 1/65 Length 35' Set between 1/65 ft. and 90 ft. ft. and <input type="checkbox"/> ft. Gravel pack? yes Size range of material 1/4 - 1/2	
11. Static water level: <input type="checkbox"/> mo./day/yr. 45 ft. below land surface Date Apr 9-78	
12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.	
13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> 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. 50' Direction S Type Sewer Line Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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 type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: Cement slab to be Poured by land owner Lester Diehl
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. Harpers Dr. Serv 176 Business name License No. Address Blue Rapids, Ks. Signed Lester Diehl Date Apr 9-78 Authorized representative	

T 12 S R 4 W 40 E 30 SENESE 1/4 1/4 1/4

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

Form WWC-5