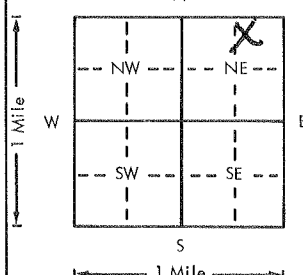


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <u>Geary</u>	Fraction <u>N.E. 1/4</u> 1/4 1/4 1/4	Section number <u>34</u>	Township number <u>T 12 South</u>	Range number <u>S 8 East E/W</u>
2. Distance and direction from nearest town or city: <u>16 mi So Manhattan 1/2 mile east on 177</u>			3. Owner of well: <u>Harris Ramsour</u> R.R. or street: <u>Alta Vista Hans</u> City, state, zip code: <u>66834</u>		
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map: 		
5. Type and color of material			From	To	6. Bore hole dia. <u>10</u> in. Completion date Well depth <u>82</u> ft. <u>12-10-76</u>
<u>top Soil Black</u>			<u>0</u>	<u>12</u>	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
<u>Rock yellow limestone</u>			<u>12</u>	<u>27</u>	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
<u>Rock Hard Blue</u>			<u>27</u>	<u>40</u>	9. Casing: Material <u>PVC</u> Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>14</u> in. RMP <u>PVC</u> Weight <u>1</u> lbs./ft. Dia. <u>5</u> in. to <u>8 1/2</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>8 1/2</u> ft. depth gage No. <u>300</u>
<u>Rock Limestone yellow (water)</u>			<u>40</u>	<u>70</u>	10. Screen: Manufacturer's name <u>Pumpco</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>.040</u> Length <u>40</u> Set between <u>4 1/2</u> ft. and <u>8 1/2</u> ft. ft. and <u>8 1/2</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8 X 1/4</u>
<u>Shale Blue</u>			<u>70</u>	<u>76</u>	11. Static water level: _____ mo./day/yr. <u>30</u> ft. below land surface Date <u>12-10-76</u>
<u>Shale Red</u>			<u>76</u>	<u>82</u>	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>18</u> g.p.m.
					13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
					14. Well head completion: <u>NA</u> <input type="checkbox"/> Pitless adapter _____ Inches above grade
					15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>14</u> ft. to <u>4</u> ft.
					16. Nearest source of possible contamination: ft. <u>70</u> Direction <u>NORTH</u> Type <u>Waterway</u> 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:	19. Remarks:		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. <u>Strader Drilling Co 237</u> Business name <u>Blue Metals</u> License No. _____ Address <u>Hawley Strader</u> Signed <u>Hawley Strader</u> Date <u>12-1</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley			T 12 S 8 E W 34 N.E. 1/4 1/4 1/4		

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

Form WWC-5