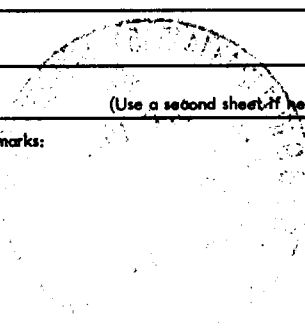


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <b>Dickinson</b>	Fraction <b>SW 1/4 NW 1/4 NW 1/4</b>	Section number <b>21</b>	Township number <b>13</b>	Range number <b>1</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: R.R. or street: City, state, zip code:		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: <b>WHEAT FIELD</b>		
5. Type and color of material			From	To	6. Bore hole dia. <b>8</b> in. Completion date <b>12/20/75</b> Well depth <b>81</b> ft.
Fine sand and clay			0	40	7. <input 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
Clay			40	70	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
Bed rock			70	76	9. Casing: Material <b>plst</b> Height <b>(Above)</b> or below Threaded <input type="checkbox"/> Welded <b>gl</b> Surface <b>18</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>5</b> in. to <b>81</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>0.214</b>
/Blue			76	81	10. Screen: Manufacturer's name <b>Western Plastics</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/gauze <b>3/32</b> Length <b>40</b> Set between <b>41</b> ft. and <b>81</b> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <b>Yes</b> Size range of material <b>1/16 to 3/8</b>
					11. Static water level: <input type="checkbox"/> mo./day/yr. <b>25</b> ft. below land surface Date <b>12/20/75</b>
					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 <b>16</b> g.p.m.
					13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date
					14. Well head completion: <input type="checkbox"/> Pitless adapter <b>18</b> inches above grade
					15. Well grouted? <b>Yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.
					16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <b>NONE</b> 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 <input type="checkbox"/> HP <input type="checkbox"/> Volts 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
					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. <b>Rader Drilling Co.</b> 194 Business name Address <b>Carlton, Kans. 67429</b> license No. Signed <b>Brad E Rader</b> Date <b>2-19-76</b> Authorized representative
18. Elevation:	19. Remarks: 				
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 13  
R 1  
W 1  
E 21  
S 1  
SW 1/4  
NW 1/4  
SE 1/4

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

Form WWC-5