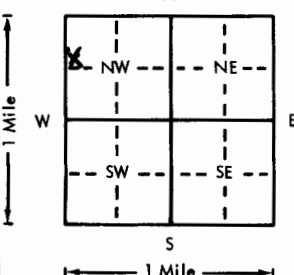


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and  
Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

B3C

1. Location of well:		County <b>Johnson</b>	Tract <b>SW 1/4 NW 1/4 NW 1/4</b>	Section number <b>30</b>	Township number <b>T 14</b>	Range number <b>(S) R 22 (EW)</b>
2. Distance and direction from nearest town or city: <b>on Edgerton Rd. (1/4 mi. S. 175th)</b>			3. Owner of well: <b>Vernon Thomas</b> <b>R.R. 1 Box 40</b> City, state, zip code: <b>Edgerton, Kansas 66021</b>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>8 1/2</b> in. Completion date Well depth <b>115</b> ft. <b>3-20-76</b>		
		<b>1/4 mi. S. of 175th</b> <b>30' NW of NW corner of house</b>		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		
5. Type and color of material				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		
surface				9. Casing: Material <b>RMP</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <b>1 1/2</b> lbs./ft. Dia. <b>5</b> in. to <b>115</b> ft. depth Wall Thickness: inches or Dia. <b>5</b> in. to <b>115</b> ft. depth gage No. <b>4</b>		
Clay brown				10. Screen: Manufacturer's name <b>Pioneer Mfg. Co.</b> Type <b>RMP</b> Dia. <b>5</b> in. Slot/gauze <b>see note</b> Length <b>9.5</b> ft. Set between <b>20</b> ft. and <b>115</b> ft. Gravel pack? <b>yes</b> Size range of material <b>1/4 x 1/8</b>		
sand yellow-orange				11. Static water level: <b>30</b> ft. below land surface Date <b>3-20-76</b>		
sandstone-- <del>blue</del> blue-gray				12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <b>6</b> g.p.m.		
shale dark gray				13. Water sample submitted: ____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date ____		
sandstone brown				14. Well head completion: <b>Well cap</b> ____ Pitless adapter ____ Inches above grade		
Note: Slot size--all casing perforated				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>5</b> ft. to <b>20</b> ft.		
with 3/32 drill from bottom of well.. 20'to 115'				16. Nearest source of possible contamination: ft. <b>100</b> Direction <b>E</b> Type <b>septic</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 ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.p.m. Type: ____ Submersible ____ Turbine ____ Jet ____ Reciprocating ____ Centrifugal ____ Other		
18. Elevation: <b>1062</b> Topography: <b>Pen</b> <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				19. Remarks: Customer is aware of State regulation and agrees to install a 4' square re-enforced concrete platform around top of well. <b>x Vernon Thomas</b>		
				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>F. E. Young Drilling 240</b> Business name License No. ____ Address <b>6355 Robinhood Merriam</b> Signed <b>FE. Young</b> Date <b>5-24-76</b> Authorized representative		

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

Form WWC-5