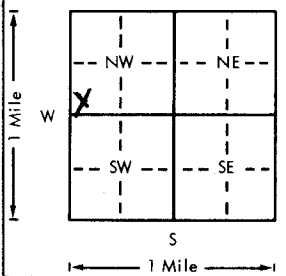


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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>Moore</u> <u>Leas</u>	Fraction <u>SW 1/4 SW 1/4 NW 1/4</u>	Section number <u>16</u> <u>36</u>	Township number <u>T 14</u>	Range number <u>S 7</u> <u>R 7</u>	E/W
2. Distance and direction from nearest town or city: <u>Dwight West</u> <u>4 mile on oil road, not 4 and 1 mile south</u>			3. Owner of well: <u>Vernon Anderson</u> R.R. or street: <u>R.R.</u> City, state, zip code: <u>Dwight, Kans</u>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>10</u> in. Completion date <u>11-6-79</u> Well depth <u>75</u> 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		
5. Type and color of material		From		To		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>T of Soil, Black</u>		<u>0</u>		<u>2</u>		9. Casing: Material <u>PVC</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>60</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>26</u> lbs./ft. Dia. <u>5</u> in. to <u>75</u> ft. depth Wall Thickness <u>26</u> in. Wall Dia. <u>5</u> in. to <u>75</u> ft. depth gage No. <u>267</u>
<u>Clay, yellow</u>		<u>2</u>		<u>4</u>		10. Screen: Manufacturer's name <u>Can-Tek</u> Type <u>PVC</u> Dia. <u>5</u> in. Slot <u>1/4</u> in. Length <u>20</u> ft. Set between <u>75</u> ft. and <u>55</u> ft. ft. and <u>55</u> ft.
<u>Clay, red</u>		<u>4</u>		<u>23</u>		Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>4</u> to <u>1/4</u> in.
<u>Rock, Very Hard yellow</u>		<u>23</u>		<u>50</u>		11. Static water level: <u>58</u> ft. below land surface Date <u>11-6-79</u> mo./day/yr.
<u>Clay, yellow</u>		<u>50</u>		<u>55</u>		12. Pumping level below land surfaces: ft. after <u> </u> hrs. pumping <u> </u> g.p.m. ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>25</u> g.p.m.
<u>Rock, lime yellow Porous Water</u>		<u>55</u>		<u>68</u>		13. Water sample submitted: <u> </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>
<u>Shale, Blue</u>		<u>68</u>		<u>75</u>		14. Well head completion: <u>NA</u> <input type="checkbox"/> Pitless adapter <u> </u> inches above grade
						15. Well grouted? <input checked="" type="checkbox"/> <u>1-2</u> ft. With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>15</u> ft. to <u>4</u> ft.
						16. Nearest source of possible contamination: <u>Septic</u> ft. <u>225</u> Direction <u>South</u> Type <u>Tanks</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 <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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. <u>Strader Drilling Co</u> <u>237</u> Business name License No. Address <u>Blue Rapids KS</u> Signed <u>Harold Strader</u> Date <u>11-6</u> Authorized representative
18. Elevation:	19. Remarks:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5