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	Fraction	Section number	Township number	Range number
	Franklin	S.E.1/4 S.E. 1/4 S.E. 1/4	21	T 15 S	R 19 E/W

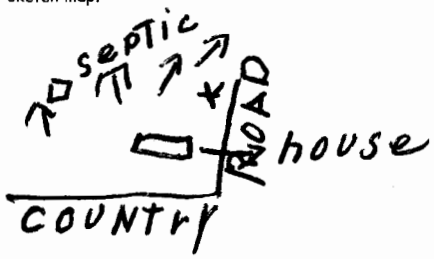
2. Distance and direction from nearest town or city: 3 Mi E. 2 Mi N.
Street address of well location if in city: Centropolis

3. Owner of well: Allen Myers
R.R. or street: R.R. 4
City, state, zip code: Ottawa, Kansas 66067

4. Locate with "X" in section below:

N — NW | NE — SW | SE (X) — S — W — E — 1 Mile

Sketch map:



6. Bore hole dia. 6¼ in. Completion date 8-15-77
Well depth 88 ft. 9" to 21'

7. XX Cable tool __ Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: XX Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material _____ Height: Above XXXXX
Threaded ____ Welded ____ Surface 8 in.
RMP ____ PVC ____ Weight Sch 40 lbs./ft.
Dia. 6 in. to 22 ft. depth Wall Thickness: inches or
Dia. ____ in. to ____ ft. depth gage No. Sch 40

5. Type and color of material	From	To
Soil & Clay	0	24
Gray Sandy Shale	24	76
Sand	76	88

(Use a second sheet if needed)

10. Screen: Manufacturer's name NONE
Type _____ Dia. _____
Slot/gauze _____ Length _____
Set between _____ ft. and _____ ft.
_____ ft. and _____ ft.
Gravel pack? no Size range of material _____

11. Static water level: 25 ft. below land surface Date 9-15-77 mo./day/yr.

12. Pumping level below land surfaces:
____ ft. after ____ hrs. pumping ____ g.p.m.
____ ft. after ____ hrs. pumping ____ g.p.m.
Estimated maximum yield 25 g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes XXX No Date _____

14. Well head completion:
__ Pitless adapter Pump House above grade

15. Well grouted? XX
With XX Neat cement ____ Bentonite ____ Concrete
Depth: From 0 ft. to 21 ft.

16. Nearest source of possible contamination:
ft. 75 Direction Northwest Type Septic
Well disinfected upon completion? XX Yes ____ No

17. Pump: ____ Not installed
Manufacturer's name Red Jacket
Model number 50N1-9BC HP ½ Volts 220
Length of drop pipe 77 ft. capacity 10 g.p.m.
Type:
XXX Submersible ____ Turbine
____ Jet ____ Reciprocating
____ Centrifugal ____ Other

18. Elevation: 1030'
Topography:
____ Hill
____ Slope
XXX Upland
____ Valley

19. Remarks:
This well was drilled on new ground Coustomer poured cement and pump house floor.

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.
Edgar Swank Drilling 124A
Business name License No.
Address R.R. 4 Ottawa, Kansas
Signed Edgar Swank Date 10-2-77
Authorized representative

T 15 R 19 E/W Sec 21 1/4 SE 1/4 SE 1/4 SE 1/4

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

Form WWC-5

MI-1023