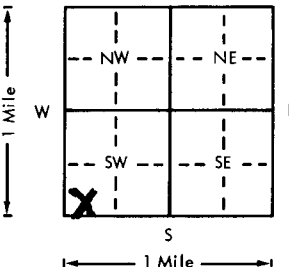


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>Dickinson</u> Fraction <u>SW 1/4 SW 1/4 SW 1/4</u> Section number <u>5</u> Township number <u>T 15 S</u> Range number <u>R 3</u> <u>EA</u>	
2. Distance and direction from nearest town or city: <u>2 S 1 W</u> Street address of well location if in city: <u>Narvare</u>	
3. Owner of well: <u>Ralph Haslover</u> R.R. or street: <u>RBI</u> City, state, zip code: <u>Hope, KS, 67451</u>	
4. Locate with "X" in section below: Sketch map: 	
6. Bore hole diameter: <u>5 1/2</u> in. Completion date: <u>11-9-78</u> Well depth: <u>72</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	
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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
9. Casing: Material: <u>Styrene</u> Height: <u>72</u> Above or below Threading: <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> RMP: <u>5</u> PVC: <u>72</u> Weight: <u>200 wall</u> Dia. <u>5</u> in. to <u>72</u> depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>72</u> ft. depth gage No. <u>200 wall</u>	
5. Type and color of material	
	From To
<u>Top Soil</u>	<u>0 2</u>
<u>Yellow clay</u>	<u>2 29</u>
<u>Some water</u>	<u>24 25</u>
<u>Red + yellow shale</u>	<u>25 48</u>
<u>lime Gravel + water</u>	<u>48 50</u>
<u>Hard Gray Rock</u>	<u>50 60</u>
<u>Water</u>	<u>60 70</u>
<u>Hard Gray Rock</u>	<u>70 72</u>
10. Screen: Manufacturer's name: <u>Jell's Howell</u> Type: <u>Styrene</u> Dia. <u>5 1/4</u> Slot/gauze: <u>10</u> Length: <u>20</u> Set between <u>45</u> ft. and <u>55</u> ft. <u>60</u> ft. and <u>70</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material: <u>30</u>	
11. Static water level: <u>40</u> ft. below land surface <u>11-9-78</u> 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 _____ g.p.m.	
13. Water sample submitted: _____ mo./day/yr. Yes _____ No _____ Date _____	
14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter _____ inches above grade	
15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>13</u> ft.	
16. Nearest source of possible contamination: <u>30</u> ft. Direction: <u>S.E.</u> Type: <u>Cattle Corral</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No _____	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: _____ Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other _____	
(Use a second sheet if needed)	
18. Elevation: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>owner to run concrete slab around well 4'x4'x4'</u>
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. Business name: <u>Bachhus Dry 100</u> License No. _____ Address: <u>Tampa, Fla.</u> Signed: <u>Paul Bachhus</u> Date: <u>11-20-78</u> - Authorized representative	

T 15 S R 3 E Sec 5 SW SW SW