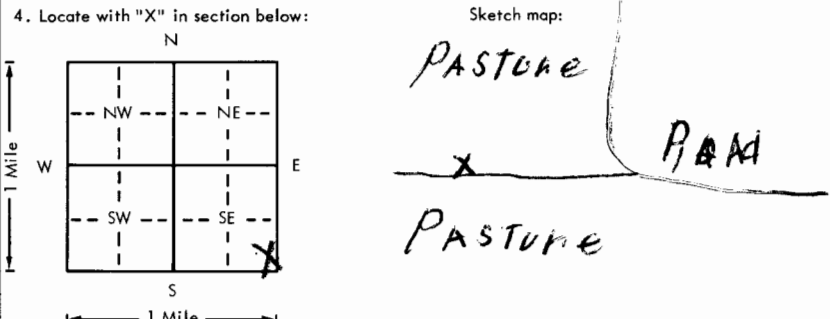


Well II 2

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>Franklin</b>	Fraction <b>SE 1/4 SE 1/4 SE 1/4</b>	Section number <b>25</b>	Township number <b>T 16 S R 17 E 1/4</b>	Range number
2. Distance and direction from nearest town or city: <b>1 mile North</b> Street address of well location if in city: <b>1/2 west Pomona</b>			3. Owner of well: <b>Andy Duffle</b> R.R. or street: <b>RRI</b> City, state, zip code: <b>Pomona, Kan. 66076</b>		
4. Locate with "X" in section below: 			6. Bore hole dia. <b>6 1/2</b> in. Completion date <b>3-24-77</b> Well depth <b>130</b> ft. <b>8" to 20'</b>		
5. Type and color of material			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 type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" 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 _____ Height: Above or below Threaded _____ Welded _____ Surface <b>12</b> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <b>sch 40</b> lbs./ft. Dia. <b>5</b> in. to <b>130</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>sch 40</b>		
			10. Screen: Manufacturer's name _____ <b>Crown Line</b> Type _____ Dia. <b>5 1/2</b> Slot/gauze <b>1/4</b> Length <b>20</b> Set between <b>110</b> ft. and <b>130</b> ft. _____ ft. and _____ ft. Gravel pack? <b>no</b> Size range of material _____		
			11. Static water level: _____ mo./day/yr. <b>65</b> ft. below land surface Date <b>3/77</b>		
			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>30</b> g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
			14. Well head completion: <b>Pump House</b> <input 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 <b>0</b> ft. to <b>20</b> ft.		
			16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? _____ Yes _____ No		
			17. Pump: _____ Not installed Manufacturer's name <b>Red Jacket</b> Model number <b>50N19BC</b> HP <b>1/2</b> Volts <b>220</b> Length of drop pipe <b>120</b> ft. capacity <b>10</b> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
			(Use a second sheet if needed)		
18. Elevation:  Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: <b>This is a ASCS well and was drilled in the pasture there is no know contamination</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>Edgar Swank</b> <b>12/14</b> Business name _____ License No. _____ Address <b>RRI 1</b> Signed <b>Edgar Swank</b> Date <b>4-10-77</b> Authorized representative	

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

Form WWC-5

T  
R  
16  
120'  
25'  
SE  
SE  
SE  
SE  
1/4  
1/4  
1/4  
1/4