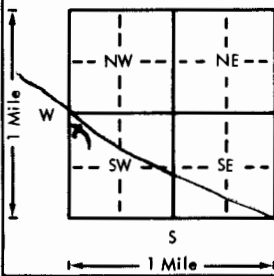
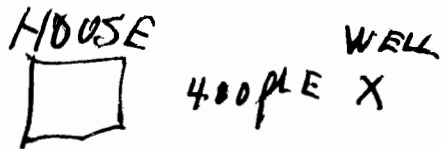


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

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

PT NW 4 28-16-7 4A

1. Location of well:		County <b>MORRIS</b>	Fraction <b>1/4 NW 1/4 SW 1/4</b>	Section number <b>28</b>	Township number <b>T 16 S R 7 E</b>	Range number <b>7</b>
2. Distance and direction from nearest town or city: <b>across track</b>		3. Owner of well: <b>EDWARD O. F KOVAC</b>				
Street address of well location if in city:		R.R. or street: City, state, zip code: <b>WILSEY KS 66873</b>				
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>7</b> in. Completion date <b>July 19 1976</b> Well depth <b>156</b> 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 type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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		
<b>DIRT BLACK</b>		<b>0</b>	<b>5</b>	9. Casing: Material <b>STEEL</b> Height <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>5</b> in. to <b>30</b> ft. depth Wall Thickness: inches or Dia. <b>5</b> in. to <b>150</b> ft. depth gage No. <b>200 TEST</b> <b>LOWELL</b>		
<b>ROCK YELLOW</b>		<b>5</b>	<b>15</b>	10. Screen: Manufacturer's name <b>JESS &amp; LOWELL</b> Type <b>200</b> Dia. <b>5</b> Slot/gauze <b>SAW BLADE</b> length <b>5</b> Set between <b>30</b> ft. and <b>40</b> ft. ft. and ft. Gravel pack? <input type="checkbox"/> Size range of material		
<b>ROCK WHITE</b>		<b>15</b>	<b>20</b>	11. Static water level: <b>25</b> ft. below land surface Date		
<b>ROCK YELLOW</b>		<b>20</b>	<b>30</b>	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.		
<b>SHALE BLUE</b>		<b>30</b>	<b>35</b>	13. Water sample submitted: <b>Yes</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Date		
<b>LIME ROCK GRAY</b>		<b>35</b>	<b>60</b>	14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade		
<b>SHALE BLUE</b>		<b>60</b>	<b>80</b>	15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>15</b> ft.		
<b>SHALE RED</b>		<b>81</b>	<b>88</b>	16. Nearest source of possible contamination: ft. <b>400</b> Direction <b>WEST</b> Type <b>HOUSE</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>ROCK YELLOW</b>		<b>88</b>	<b>95</b>	17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <b>L.H. KRAUSE</b> Model number <b>156</b> HP <b>1</b> Volts <b>115</b> Length of drop pipe <b>13</b> ft. capacity <b>5</b> 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		
<b>SHALE BLUE</b>		<b>95</b>	<b>104</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>L.H. KRAUSE</b> <b>156</b> Business name License No. Address <b>13 SOUTH BELFAY ST</b> Signed <b>[Signature]</b> Date <b>July 20</b> Authorized representative		
<b>LIME ROCK GRAY</b>		<b>104</b>	<b>118</b>			
<b>SHALE BLUE</b>		<b>118</b>	<b>122</b>			
<b>SHALE RED</b>		<b>122</b>	<b>127</b>			
<b>LIME ROCK GRAY</b>		<b>127</b>	<b>150</b>			
(Use a second sheet if needed)						
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 WW-5