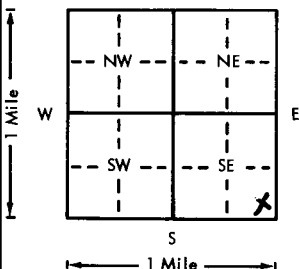
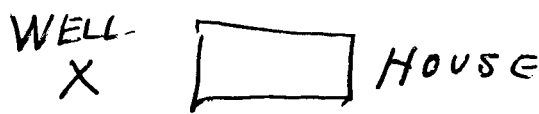


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 MORRIS	Fraction SE 1/4 SE 1/4 SE 1/4	Section number 6	Township number T 16 S	Range number R 8 E
2. Distance and direction from nearest town or city: 3 WEST			3. Owner of well: CITY OF COUNCIL GROVE			
Street address of well location if in city:			City, state, zip code: 66846			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 9 in. Completion date _____ Well depth 120 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		
CLEANED OUT & CASED				9. Casing: Material PVC Height (Above or below surface) 12 in. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 100 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 10218		
				10. Screen: Manufacturer's name PUMPAC Type PRC Dia. 5 Slot/gauze 7/16 Length 20 Set between 100 ft. and 120 ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____		
				11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date _____		
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield PUMPED 40 gpm _____ g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
				14. Well head completion: _____ 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 0 ft. to 15 ft.		
				16. Nearest source of possible contamination: ft. _____ Direction EST Type 5 TANK Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: _____ Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input checked="" type="checkbox"/> Submersible Three _____ Turbine <input type="checkbox"/> Jet _____ Reciprocating <input type="checkbox"/> Centrifugal _____ Other _____		
18. Elevation:		19. Remarks:		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. LILKINER SHIP 156 Business name _____ License No. _____ Address 13 SOUTH BELLEVUE G 9 Signed [Signature] Date 7-7-81 Authorized representative		

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

Form WWC-5