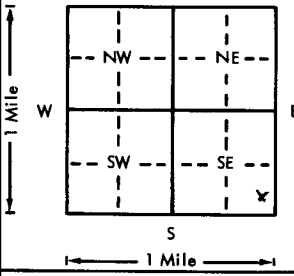
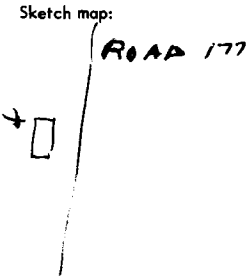


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>MORRIS</b>	Fraction <b>SE 1/4 SE 1/4 SE 1/4</b>	Section number <b>16</b>	Township number <b>T 16 S</b>	Range number <b>R 8 E/W</b>
2. Distance and direction from nearest town or city: <b>WEST OF FAIR GROUNDS</b>				3. Owner of well: <b>HYDROPONIC INC.</b> R.R. or street: <b>601 UNION ST.</b> City, state, zip code: <b>COUNCIL GROVE KS 66846</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>8</b> in. Completion date <b>12-18-77</b> Well depth <b>41</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 checked="" 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
<b>BLACK DIRT</b>		<b>0</b>		<b>3</b>		9. Casing: Material <b>STEEL</b> Height (Above) or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>96</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft.
<b>DARK RED CLAY</b>		<b>3</b>		<b>22</b>		Dia. <b>5</b> in. to <b>12</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <input type="checkbox"/>
<b>DARK RED &amp; GRAVEL</b>		<b>22</b>		<b>25</b>		10. Screen: Manufacturer's name <b>JESSY LOWELL</b> Type <b>300</b> Dia. <b>5</b> Slot/gauze <b>SAW BLADE</b> Length <b>20</b> Set between <b>18</b> ft. and <b>41</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <input type="checkbox"/>
<b>LIME ROCK YELLOW</b>		<b>25</b>		<b>37</b>		11. Static water level: <input type="checkbox"/> mo./day/yr. <b>20</b> ft. below land surface Date <b>12-18-77</b>
<b>SHALE BLUE</b>		<b>37</b>		<b>41</b>		12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.
						13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <input type="checkbox"/>
						14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>16</b> 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>12</b> ft.
						16. Nearest source of possible contamination: ft. <b>100</b> Direction <b>NORTH</b> Type <b>SAME TANK</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>PUMPCO</b> Model number <b>1025 580P</b> HP <b>1/2</b> Volts <b>230</b> Length of drop pipe <b>35</b> ft. capacity <b>7</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
						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>G.H. KRAUSE SHOP</b> <b>156</b> Business name License No. Address <b>COUNCIL GROVE MS</b> <b>66846</b> Signed <b>[Signature]</b> Date <b>12-20-77</b> Authorized representative
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> S.W. Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		<b>NEARLY FLAT</b>				

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

Form WWC-5