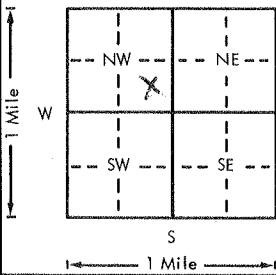
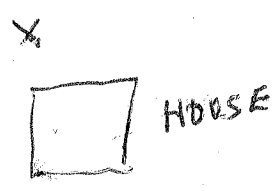


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY

WATER WELL RECORD
KSA 82a-1201-1215

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

LAKE-H-5

1. Location of well:	County MORRIS	Fraction 1/4 SE 1/4 NW 1/4	Section number 18	Township number T 16 S	Range number R 8 E
2. Distance and direction from nearest town or city: 5 MILES west		3. Owner of well: PAUL R MOSI MAN			
Street address of well location if in city: TO END OF LAKE BACK EAST		R.R. or street: 2803 SCRISLER			
		City, state, zip code: INDEPENDENCE MO 64052			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 9 in. Completion date _____	
				Well depth 85 ft.	
5. Type and color of material		From	To	7. <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug	
DIRT BLACK		0	4	<input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
LIME ROCK YELLOW		4	21	8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry	
SHALE BLUE		21	28	<input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock	
SHALE RED		28	40	<input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
SHALE BLUE		40	58	9. Casing: Material STEEL Height: 12 in.	
LIME ROCK GRAY		58	62	Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft.	
SHALE BLUE		62	75	Dia. 5 in. to 25 ft. depth Wall Thickness: inches or	
SHALE RED		75	85	Dia. 35 in. to 82 ft. depth gage No. _____	
				10. Screen: Manufacturer's name JESS LOWELL	
				Type 300 Dia. 5	
				Slot/gauze SAV BLADE Length _____	
				Set between 25 ft. and 35 ft.	
				Gravel pack? _____ Size range of material _____	
				11. Static water level: _____ mo./day/yr.	
				25 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 _____ 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 12 inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/>	
				With: _____ Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete	
				Depth: From 0 ft. to 15 ft.	
				16. Nearest source of possible contamination: _____	
				ft. _____ Direction _____ Type 2ND WEST	
				Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: <input checked="" type="checkbox"/> Not installed	
				Manufacturer's name _____	
				Model number _____ HP _____ Volts _____	
				Length of drop pipe _____ ft. capacity _____ 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	
18. Elevation:		19. Remarks:			
Topography: <input checked="" type="checkbox"/> Hill		TO INSTALL			
<input type="checkbox"/> Slope		TO EAST			
<input type="checkbox"/> Upland		HOLDING TANK			
<input type="checkbox"/> Valley					
		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.			
		L.H. KRAUSE 156			
		Business name _____ License No. _____			
		Address L.H. KRAUSE SHOP			
		Signed L.H. KRAUSE Date July 1/14			
		Authorized representative			

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

Form WWC-5