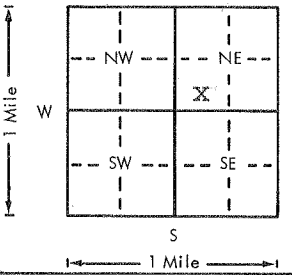
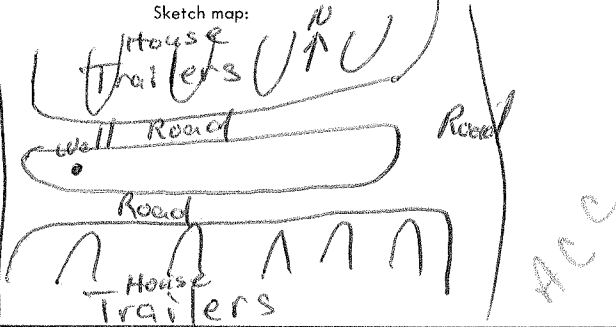
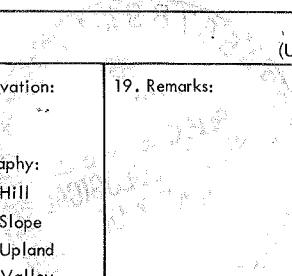


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>LYON</b>		Fraction <b>SW 1/4 SW 1/4 NE 1/4</b>		Section number <b>11</b>		Township number <b>T 18 S</b>		Range number <b>R 10</b>		<b>EW</b>	
2. Distance and direction from nearest town or city: Street address of well location if in city: <b>Block 139 Americus, Ks.</b>					3. Owner of well: <b>Don Stone</b> R.R. or street: City, state, zip code: <b>Americus, Kansas 66835</b>						
4. Locate with "X" in section below:  1 Mile				Sketch map: 				6. Bore hole dia. <u>8</u> in. Completion date <u>6/30/77</u> Well depth <u>40</u> 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			
								8. Use: <input 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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other			
								9. Casing: Material <u>pvc</u> Height: <u>24</u> Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>24</u> in. RMP <u>5</u> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>40</u> ft. depth Wall Thickness: _____ inches or Dia. _____ in. to _____ ft. depth gage No. <u>258</u>			
5. Type and color of material				From		To		10. Screen: Manufacturer's name _____ <u>shop perforated</u> Type <u>pvc</u> Dia. <u>5 in.</u> Slot/gauze <u>.12</u> Length <u>7 ft.</u> Set between <u>23</u> ft. and <u>34</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> <u>yes</u> Size range of material <u>3/8 in.</u>			
top soil				black		0 4		11. Static water level: _____ mo./day/yr. <u>19</u> ft. below land surface Date <u>6/30/77</u>			
clay				<del>loose</del> loose brown		4 24		12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>40+</u> g.p.m.			
gravel				medeum size brown		24 33		13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____			
shale				grey		33 40		14. Well head completion: <u>well seal</u> <input type="checkbox"/> Pitless adapter <u>24</u> Inches above grade			
								15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>10</u> ft. to <u>0</u> ft.			
								16. Nearest source of possible contamination: ft. <u>1000</u> Direction <u>east</u> Type <u>gas tank</u> 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			
								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>Bledsoe Drilling Co. 349</b> Business name _____ License No. _____ Address <b>212 Maple Cottonwood Falls</b> Signed <u>John A. Bledsoe</u> Date <u>6/30/77</u> Authorized representative			
18. Elevation:		19. Remarks: 									
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley											

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

Form WWC-5