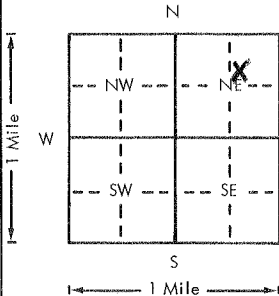


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Lyon	Fraction SW 1/4 NE 1/4 NE 1/4	Section number 10	Township number T 19 S R 11	Range number EW
2. Distance and direction from nearest town or city: Street address of well location if in city: 1427 College Dr.				3. Owner of well: Richard Waldron R.R. or street: 1427 College Dr. City, state, zip code: Emporia, Kansas 66801		
4. Locate with "X" in section below: 				Sketch map: Dry hole trees + hill drainage HOUSE laterals Street 30' → ← 40'		6. Bore hole dia. 6 in. Completion date _____ Well depth 80 ft. 9-29-78
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 <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary
Brown soil				0	2	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
Gritty tan clay				2	15	9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____
Gray shale with some grit						10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____
(varying from medium to hard)				15	46	11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date _____
Cemented sand stone (very hard)				46	49	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.
Gray shale (medium to soft) to hard)				49	53	13. Water sample submitted: _____ mo./day/yr. Yes _____ No _____ Date _____
Cemented sand stone (very hard)				53	58	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade
Dark gray shale (medium)				58	73	15. Well grouted? _____ With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From _____ ft. to _____ ft.
Light gray shale with some grit (medium)				73	80	16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input 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 type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
(Use a second sheet if needed)						
18. Elevation: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: Dry hole. Filled with natural earth materials on "Completion Date" noted above.			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. Lespagnard Water W. Contr. Business name _____ License No. _____ Address 1312 Trail Ridge Rd. Emp. Signed George Lespagnard date 9/29/78 Authorized representative	

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

Form WWC-5