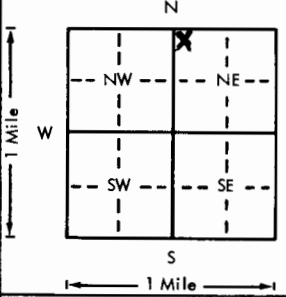


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <u>Marion</u> Fraction <u>M^{1/4} N^{1/4} E^{1/4}</u> Section number <u>7</u> Township number <u>T 19 S R 4</u> Range number <u>4</u> EN	
2. Distance and direction from nearest town or city: <u>5 N 1 1/2 W</u> 3. Owner of well: <u>Earl Thomas</u> Street address of well location if in city: <u>Marion Ks.</u> R.R. or street: <u>RR 4</u> City, state, zip code: <u>Marion, Ks. 66861</u>	
4. Locate with "X" in section below: Sketch map: 	6. Bore hole dia. <u>9</u> in. Completion date <u>11-21-77</u> Well depth <u>110</u> ft.
	7. <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hallaw rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary
5. Type and color of material	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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
	9. Casing: Material <u>PVC</u> Height: <u>98</u> below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>98</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>12</u> lbs./ft. Dia. <u>6</u> in. to <u>110</u> ft. depth Wall Thickness: inches or Dia. <u>6</u> in. to <u>110</u> ft. depth gage No. <u>1275</u>
	10. Screen: Manufacturer's name <u>Certain teed</u> Type <u>PVC</u> Dia. <u>6"</u> Slot/gauze <u>1/8</u> Length <u>20</u> Set between <u>30</u> ft. and <u>40</u> ft. <u>90</u> ft. and <u>100</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/8</u>
	11. Static water level: <u>32</u> ft. below land surface Date <u>11-21-77</u> mo./day/yr.
	12. Pumping level below land surfaces: <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u> </u> g.p.m.
	13. Water sample submitted: <u> </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>
	14. Well head completion: <u>Well House</u> <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade
	15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u> </u> ft. to <u> </u> ft.
	16. Nearest source of possible contamination: <u>in Pasture</u> ft. <u> </u> Direction <u> </u> Type <u> </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 <u> </u> HP <u> </u> Volts <u> </u> Model number <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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 checked="" type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>Owner to run concrete slab around well 4'x4'x4" + Grout well 10'</u> 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. <u>Backhus Dr. 1, 120</u> Business name <u> </u> License No. <u> </u> Address <u>Tampa, Ks.</u> Signed <u>Paul Backhus</u> Date <u>11-28-77</u> Authorized representative

19
40
7
1/4
1/4
1/4

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

Form WWC-5