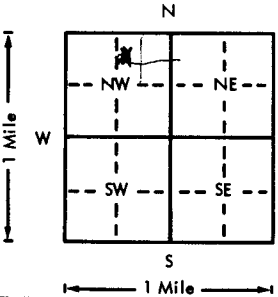


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Marion	Fraction NW 1/4 NE 1/4 NW 1/4	Section number 9	Township number T 19 S R 5 E/W	Range number
2. Distance and direction from nearest town or city: 4 mile E & 1 1/2 South of Antelope Street address of well location if in city:			3. Owner of well: Melvin Jewett R.R. or street: RR City, state, zip code: Marion, Kan			
4. Locate with "X" in section below:			Sketch map: Lowland with Timber 30' Drop Hill PASTURE 600' GAS well		6. Bore hole dia. 6 1/2 in. Completion date 2-2-77 Well depth 80 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 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	
Topsoil			0	2	9. Casing: Material PIBS Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 18 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 40 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 1200	
Broken Lime & Shale - Yel			2	8	10. Screen: Manufacturer's name Sunflower Type RMP Dia. 5 <input checked="" type="checkbox"/> Slot gauge Yel Length 40' Set between 40 ft. and 80' ft. _____ ft. and _____ ft. Gravel pack? NO Size range of material _____	
Shale - Yel			8	24	11. Static water level: _____ mo./day/yr. 40 ft. below land surface Date 2-2-77	
Red Rock - Red			24	35	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 25 g.p.m.	
Shale - Like Gray			35	40	13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____	
Broken Lime & Shale - Yel 46 H2O			40	46	14. Well head completion: <input type="checkbox"/> Pitless adapter 18 Inches above grade	
Lime - Gray			46	55	15. Well grouted? Yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 13 ft.	
Lime - Wht			55	60	16. Nearest source of possible contamination: GAS ft. 600 Direction SE Type Well Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Shale - Gray			60	70	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	
Lime - Gray			70	80	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. Zinn Water Well Drilling 218 Business name _____ License No. _____ Address Lost Springs, Kan Signed Joseph A. Zinn Date 2-6-77 Authorized representative	
18. Elevation:			19. Remarks: Windmill to be installed on well with stock TANK below hill.			
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

19 50 9 - NW 1/4 NE 1/4

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

Form WWC-5