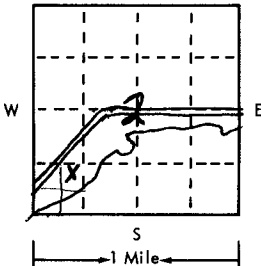


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County <u>Chase</u>	Township name	Fraction <u>NE 1/4 SW 1/4</u>	Section number <u>2</u>	Town number <u>21S</u>	Range number <u>7E</u>
Distance and direction from nearest town or city: <u>4.5 W 1 1/2 S of</u>				3 Owner of well: <u>Walter Gantz</u>		
Street address of well location if in city: <u>Bazaar</u>				Address: <u>RR-1 Cottonwood Falls KS</u>		
Locate with "X" in section below: N  W E S 1 Mile			Sketch map:		4 Well depth: <u>36</u> ft. Date of completion <u>7/27/76</u> Well diameter <u>10</u> in.	
2 Type and color of material			From	To	5 <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	
			Top soil 0 1		6 Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well	
			Clay DK Brn 1 5		7 Casing: Material <u>PVC</u> Height: above <u>surface</u> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>48</u> in. Diam. <u>8</u> in. to <u>36</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
			Clay with Gravel 5 11		8 Screen: <u>Slot Perforated 1/2" x 6"</u> <u>Certain Feed</u> Manufacturer <u>PVC</u> Dia. <u>8"</u> Type <u>gauze</u> Length <u>24"</u> Set between <u>12</u> ft. and <u>34</u> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1/4" - 3/8"</u>	
			Aluvial Gravel 11 14		9 Static water level: <u>11</u> ft. below land surface Date <u>7/27/76</u>	
Hard Lime 14 16		10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>3-4</u> g.p.m.				
Shale Lt Gray 16 20		11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____				
Lime & Chert 20 36		12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade				
		13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From <u>11</u> ft. to <u>3</u> ft.				
		14 Nearest source of possible contamination: ft. <u>650</u> Direction <u>South</u> Type <u>Creek</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
		15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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				
16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		17 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>McNee Drilling 203</u> Business name _____ License No. _____ Address <u>Cottonwood Falls KS</u> Signed <u>[Signature]</u> Date <u>7/30/76</u> Authorized representative				

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5