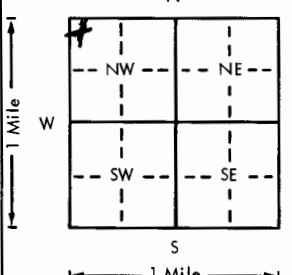


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>Harvey</u> Fraction <u>NW 1/4 NW 1/4 NW 1/4</u> Section number <u>4</u> Township number <u>T 22 S R 1</u> Range number <u>1</u> E-W	
2. Distance and direction from nearest town or city: <u>5 1/2 E from 15 Highway Gossel</u> 3. Owner of well: <u>Orie Lehrman</u> R.R. or street: <u>BR2</u> City, state, zip code: <u>Newton Ks.</u>	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
	From To
<u>Top Soil</u>	<u>0 2</u>
<u>yellow Clay</u>	<u>2 12</u>
<u>fine Dry Sand</u>	<u>12 24</u>
<u>Gray Shale</u>	<u>24 52</u>
<u>Red Shale</u>	<u>52 62</u>
<u>Some water</u>	<u>62 63</u>
<u>Gray + Blue Shale</u>	<u>63 80</u>
<u>Water</u>	<u>80 81</u>
<u>Blue Shale</u>	<u>81</u>
(Use a second sheet if needed)	
18. Elevation:	19. Remarks:
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	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 Dug 180</u> Business name _____ License No. _____ Address <u>Tampa, Ka</u> Signed <u>[Signature]</u> Date <u>4-11-77</u> Authorized representative

6. Bore hole dia. <u>8 1/2</u> in. Well depth <u>86</u> ft. Completion date <u>4-11-77</u>
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 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
9. Casing: Material <u>PVC</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>74</u> in. RMP <u>5</u> <u>PVC</u> <input checked="" type="checkbox"/> Weight <u>2640</u> lbs./ft. Dia. <u>5</u> in. to <u>86</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>86</u> ft. depth gage No. <u>238</u>
10. Screen: Manufacturer's name <u>ASTM</u> Type <u>PVC</u> Dia. <u>5</u> Slot/gauze <u>1/8</u> Length <u>30</u> Set between <u>60</u> ft. and <u>86</u> ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>30</u>
11. Static water level: <u>MNC</u> mo./day/yr. <u>42</u> ft. below land surface Date _____
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.
13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____
14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter _____ Inches above grade
15. Well grouted? <input checked="" type="checkbox"/> <u>MNC</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>13</u> ft.
16. Nearest source of possible contamination: <u>Septic</u> ft. <u>60</u> Direction <u>SE</u> Type <u>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

T 22 S R 1 W 1
Sec 4
NW 1/4 NW 1/4 NW 1/4