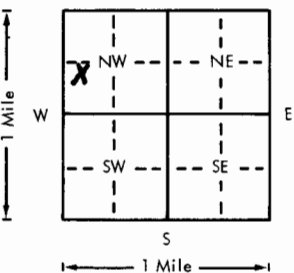


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Harvey	Fraction NW 1/4 SW 1/4 NW 1/4	Section number 8	Township number T 23 S R 1	Range number EW
2. Distance and direction from nearest town or city: Street address of well location if in city: 605 Northridge Rd Newton, Ks.				3. Owner of well: R.R. or street: City, state, zip code: Ernest Leitloff 605 Northridge Rd Newton, Ks. 67114		
4. Locate with "X" in section below: Sketch map: 				6. Bore hole dia. 10 in. Completion date 5-10-77 Well depth 45 ft.		
5. Type and color of material				7. Cable tool <input checked="" 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 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		
From To				9. Casing: Material Plst Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight 1.95 lbs./ft. Dia. 6 in. to 45 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. 1200		
				10. Screen: Manufacturer's name J+L Type RMP Dia. 6" Slot/gauze 1.030 Length 20' Set between 25 ft. and 45 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material F-1/2"		
Topsoil black				0	5	11. Static water level: <input type="checkbox"/> mo./day/yr. 17 ft. below land surface Date 5-10-77
Clay gray				5	8	12. Pumping level below land surfaces: 42 ft. after 1 hrs. pumping 18 g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 18 g.p.m.
Clay - sandy gray				8	12	13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>
Sand Fine gray				12	18	14. Well head completion: <input type="checkbox"/> Pitless adapter 12 Inches above grade
Clay + silt yellow				18	32	15. Well grouted? yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 20 ft.
Clay + silt gray				32	38	16. Nearest source of possible contamination: light sewer ft. 12 Direction W Type line Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Sand coarse				38	42	17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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
Shale dk gray				42	45	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. Miller Water Well Serv. 137 Business name Hutchinson, Ks. License No. <input type="checkbox"/> Address Joe Miller Date 5-30-77 Signed <input type="checkbox"/> Authorized representative
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 23
 R 1
 W EW
 Sec 8
 NW SW NE
 1/4 1/4 1/4

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

Form WWC-5