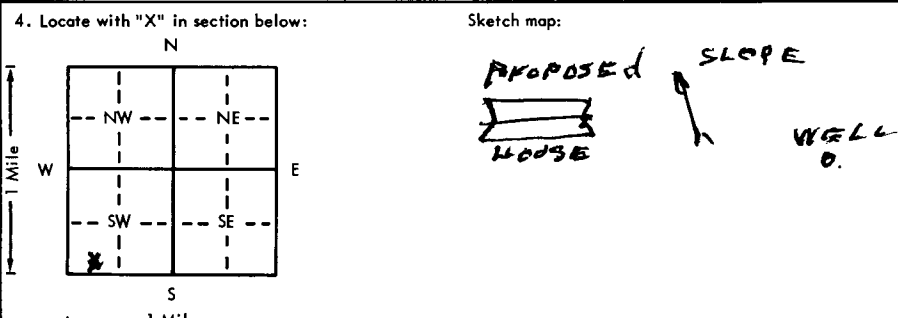


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <b>NEOSHO</b> Fraction <b>S 1/2 SW 1/4 SW 1/4</b> Section number <b>2</b> Township number <b>T 27 S R 19 E/W</b> Range number																																					
2. Distance and direction from nearest town or city: <b>7 MI. E &amp; N.</b> Street address of well location if in city: <b>1 E. OF CHAUTE</b>																																					
3. Owner of well: <b>DUANE KNAPP</b> R.R. or street: <b>606 S EVERGREEN</b> City, state, zip code: <b>CHAUTE KAN</b>																																					
4. Locate with "X" in section below: Sketch map: 																																					
6. Bore hole dia. <b>7</b> in. Completion date: <b>11/10/82</b> Well depth <b>93</b> 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																																					
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 <b>PITS</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>16</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <b>6</b> in. to <b>30</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gauge No. <b>1210</b>																																					
5. Type and color of material																																					
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;"></th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td><b>TOP SOIL</b></td> <td><b>0</b></td> <td><b>3</b></td> </tr> <tr> <td><b>LIME BOULDERS</b></td> <td><b>3</b></td> <td><b>15</b></td> </tr> <tr> <td><b>VERY HARD EYEY LIME</b></td> <td><b>15</b></td> <td><b>32</b></td> </tr> <tr> <td><b>GREY SAND ROCK S.O.W.</b></td> <td><b>32</b></td> <td><b>35</b></td> </tr> <tr> <td><b>HARD BRN LIME</b></td> <td><b>35</b></td> <td><b>39</b></td> </tr> <tr> <td><b>COAL</b></td> <td><b>39</b></td> <td><b>41</b></td> </tr> <tr> <td><b>WHITE LIME</b></td> <td><b>41</b></td> <td><b>62</b></td> </tr> <tr> <td><b>GREY SHALE</b></td> <td><b>62</b></td> <td><b>63</b></td> </tr> <tr> <td><b>BROWN LIME</b></td> <td><b>63</b></td> <td><b>76</b></td> </tr> <tr> <td><b>GREY SHALE</b></td> <td><b>76</b></td> <td><b>77</b></td> </tr> <tr> <td><b>WHITE LIME</b></td> <td><b>77</b></td> <td><b>93</b></td> </tr> </tbody> </table>			From	To	<b>TOP SOIL</b>	<b>0</b>	<b>3</b>	<b>LIME BOULDERS</b>	<b>3</b>	<b>15</b>	<b>VERY HARD EYEY LIME</b>	<b>15</b>	<b>32</b>	<b>GREY SAND ROCK S.O.W.</b>	<b>32</b>	<b>35</b>	<b>HARD BRN LIME</b>	<b>35</b>	<b>39</b>	<b>COAL</b>	<b>39</b>	<b>41</b>	<b>WHITE LIME</b>	<b>41</b>	<b>62</b>	<b>GREY SHALE</b>	<b>62</b>	<b>63</b>	<b>BROWN LIME</b>	<b>63</b>	<b>76</b>	<b>GREY SHALE</b>	<b>76</b>	<b>77</b>	<b>WHITE LIME</b>	<b>77</b>	<b>93</b>
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10. Screen: Manufacturer's name <b>JESS LOWELL</b> Type _____ Dia. _____ Slot/gauge _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? <input type="checkbox"/> Size range of material _____																																					
11. Static water level: _____ mo./day/yr. <b>22</b> ft. below land surface Date <b>10/10/82</b>																																					
12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>12</b> g.p.m.																																					
13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input type="checkbox"/> Date _____																																					
14. Well head completion: _____ Pitless adapter <b>16</b> Inches above grade																																					
15. Well grouted? _____ With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>16</b> ft.																																					
16. Nearest source of possible contamination: <b>none</b> ft. _____ Direction _____ Type _____ 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: _____ Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other _____																																					
(Use a second sheet if needed)																																					
18. Elevation: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <b>THIS WAS A PROPOSED BUILDING SITE</b>																																				
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. <b>TUNNINGS WELL SEAL 312</b> Business name _____ License No. _____ Address <b>TOPEKA KAN</b> Signed <b>Don Tunnings</b> Date <b>11/10/82</b> Authorized representative																																					

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

Form WWC-5