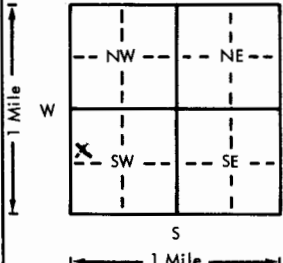


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Butler</b>	Fraction <b>SW 1/4 NW 1/4 SW 1/4</b>	Section number <b>1</b>	Township number <b>T 27 S</b>	Range number <b>R 4 E</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:	<b>2 N. 1 E. 1/4 N of Augusta</b>		3. Owner of well: R.R. or street: City, state, zip code:		
4. Locate with "X" in section below: Sketch map:  <b>well in open field</b>			6. Bore hole dia. <b>10</b> in. Completion date <b>2-10-76</b> Well depth <b>60</b> ft.		
5. Type and color of material			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>Steel</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>76</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <b>15</b> lbs./ft. Dia. <b>6</b> in. to <b>60</b> ft. depth Wall Thickness: inches or Dia. <b>1/2</b> in. to <b>1</b> ft. depth gauge No. <b>175</b>		
			10. Screen: Manufacturer's name <b>Getz</b> Type <b>RMP</b> Dia. <b>6</b> Slot gauge <b>1/16</b> Length <b>20 ft</b> Set between <b>30</b> ft. and <b>50</b> ft. Gravel pack? <b>no</b> Size range of material		
			11. Static water level: <b>19</b> ft. below land surface Date <b>2-10-76</b> mo./day/yr.		
(Use a second sheet if needed)			12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <b>4</b> g.p.m.		
			13. Water sample submitted: ____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date		
			14. Well head completion: ____ Pitless adapter <b>16</b> inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.		
			16. Nearest source of possible contamination: <b>Field</b> ft. ____ Direction ____ Type <b>MNC</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(Use a second sheet if needed)			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		
			18. Elevation:		
			19. Remarks: <b>owner will put on slab.</b> <b>Elwitt Marcum</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>Wilke Well Drilling 122</b> Business name <b>Augusta Kans</b> License No. ____ Address <b>Murrayville</b> Date <b>2-10-76</b> Signed <b>Murrayville</b> Authorized representative		

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

Form WWC-5