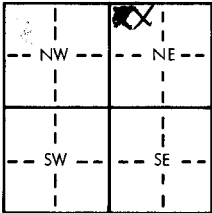
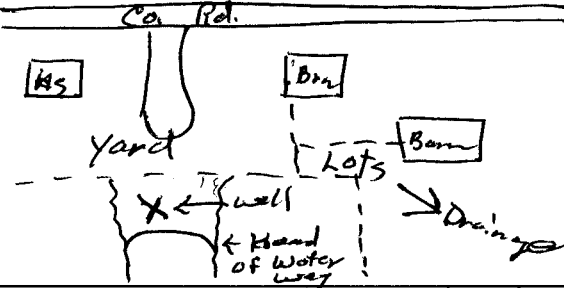


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

ABB

1. Location of well:		County Brown	Fraction NW 1/4 NW 1/4 NE 1/4	Section number 22	Township number T 2 S R 17 EW
2. Distance and direction from nearest town or city: 2 E 1 N			3. Owner of well: Robert Davis		
Street address of well location if in city: Hicksville			R.R. or street: RR		
			City, state, zip code: Hicksville, Ks. 66434		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 10 in. Completion date _____	
				Well depth 100 ft. 10-16-78	
				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 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 PVC Height: Above or below _____	
				Threading: _____ Welded _____ Surface 36 in.	
				RMP: _____ PVC Clue Weight 2.74 lbs./ft.	
				Dia. 5 in. to 100 ft. depth Wall Thickness: inches or _____	
				Dia. _____ in. to _____ ft. depth gage No. 258	
5. Type and color of material				10. Screen: Manufacturer's name _____	
				Type Rvc Dia. 5"	
				gauge 020 Length 20	
				Set between 27-32 ft. and 45-50 ft.	
				70 ft. and 80 ft.	
				Gravel pack? yes Size range of material 030/060	
				11. Static water level: _____ mo./day/yr.	
				20 ft. below land surface Date 10-16-78	
				12. Pumping level below land surfaces: first	
				_____ ft. after _____ hrs. pumping _____ g.p.m.	
				_____ ft. after _____ hrs. pumping _____ g.p.m.	
				Estimated maximum yield 15 _____ g.p.m.	
				13. Water sample submitted: _____ mo./day/yr.	
				Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____	
				14. Well head completion: TOPCAP	
				<input type="checkbox"/> Pitless adapter 36 Inches above grade	
				15. Well grouted? yes	
				With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete	
				Depth: From 0 ft. to 20 ft.	
				16. Nearest source of possible contamination: _____	
				ft. 100 Direction E Type lots	
				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	
18. Elevation: 1110		19. Remarks: owner to install slab		20. Water well contractor's certification:	
Topography:				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.	
<input type="checkbox"/> Hill				STRADER DRIG CO 182	
<input checked="" type="checkbox"/> Slope				Business name _____ License No. _____	
<input type="checkbox"/> Upland				Address RT1 Holton KS	
<input type="checkbox"/> Valley				Signed Dale Cochran Date 10-16-78	
				Authorized representative	

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

Form WWC-5

BR = 1024 ∇ = 1090

1170 22
 NW 1/4 NE
 Sec 22