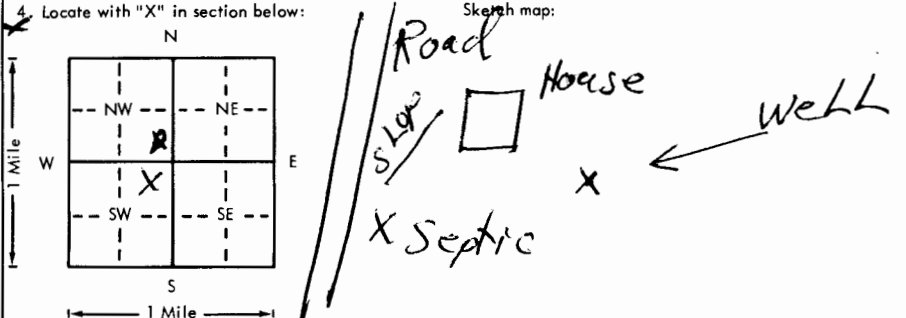


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

NE NE SW

1. Location of well: County <u>Cowley</u> Fraction <u>NW 1/4 SE 1/4 SE 1/4</u> Section number <u>130</u> Township number <u>T 30 S R 13</u> Range number <u>EW</u>	
2. Distance and direction from nearest town or city: <u>1/2 mile West</u> Street address of well location if in city: <u>Rock Kan 2-W 1-N</u> 3. Owner of well: <u>Charles B. [redacted]</u> R.R. or street: <u>Rock Kan</u> City, state, zip code: <u>[redacted]</u>	
4. Locate with "X" in section below:  6. Bore hole dia. <u>9</u> in. Completion date <u>11/8/78</u> Well depth <u>100</u> 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 <u>Plast</u> Height: Above or below <u>18</u> in. Threading: <u>gl</u> Surface <u>18</u> in. RMP: <u>PVC</u> Weight <u>100</u> lbs./ft. Dia. <u>6</u> in. x <u>100</u> ft. depth Wall Thickness: inches or <u>1.75</u> Dia. in. to <u>1.75</u> ft. depth gage No. <u>1.75</u>	
5. Type and color of material	
10. Screen: Manufacturer's name <u>Sun Flower</u> Type <u>100</u> Dia. <u>6</u> Slot/gauze <u>1/16</u> Length <u>20</u> Set between <u>60</u> ft. and <u>80</u> ft. Gravel pack? <u>No</u> Size range of material: _____	
11. Static water level: <u>50</u> ft. below land surface Date <u>10/19/78</u> mo./day/yr.	
12. Pumping level below land surfaces: <u>60</u> ft. after <u>1</u> hrs. pumping <u>30</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____	
14. Well head completion: _____ Pitless adapter <u>18</u> Inches above grade	
15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
16. Nearest source of possible contamination: _____ ft. Direction <u>SW</u> Type <u>Septic</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: _____ 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 checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>Owner To Install Concrete Slab around Well</u>
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>Winter Well Drill 2514</u> Business name <u>R2 Box 30 Agastake</u> License No. _____ Address <u>Charles Winter</u> Signed <u>Charles Winter</u> Date <u>11/3/78</u> Authorized representative	

T 30 S R 13 NE RESUD

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

Form WWC-5