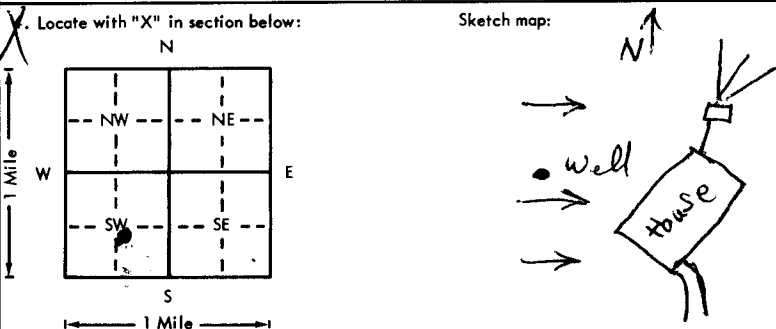


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 <u>Cowley</u> Fraction <u>NW 1/4 SE 1/4 SW 1/4</u> Section number <u>14</u> Township number <u>T 31 S R 4</u> Range number <u>EW</u>	
2. Distance and direction from nearest town or city: <u>2 miles West of Floral</u> Street address of well location if in city: _____	
3. Owner of well: <u>Keith Floyd Stiner</u> R.R. or street: <u>403 W. 13th</u> City, state, zip code: <u>Winfield, KANSAS 67156</u>	
4. Locate with "X" in section below: Sketch map: 	
6. Bore hole dia. <u>40</u> in. Completion date <u>10-11-77</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>RMP</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>14</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>15.5</u> lbs./ft. Dia. <u>6</u> in. to <u>100</u> ft. depth Wall Thickness: inches or Dia. <u>1/8</u> in. to <u> </u> ft. depth gage No. <u> </u>	
10. Screen: Manufacturer's name <u>Sunflower</u> Type <u>RMP</u> Dia. <u>6in</u> Slot/gauze <u>1/16"</u> Length <u>10</u> Set between <u>90</u> ft. and <u>100</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>5/8"</u>	
11. Static water level: <u>45</u> ft. below land surface Date <u>10-11-77</u> mo./day/yr.	
12. Pumping level below land surfaces: <u>NA</u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>10gal</u> g.p.m.	
13. Water sample submitted: <u>1</u> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date <u> </u>	
14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>14</u> Inches above grade	
15. Well grouted? <u>Yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>20</u> ft.	
16. Nearest source of possible contamination: ft. <u>200</u> Direction <u>EAST</u> Type <u>Septic TANK</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 <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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	
(Use a second sheet if needed)	
18. Elevation: Topography: <input checked="" type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: _____
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. Business name <u>EASTMAN Drilling 299</u> License No. <u> </u> Address <u>Box 115, Winfield</u> Signed <u>Dale Eastman</u> Date <u>10-20-77</u> Authorized representative	

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

Form WWC-5