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

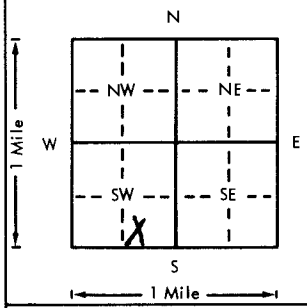
1. Location of well:	County	Fraction	Section number	Township number	Range number
	WASHINGTON	SW 1/4 SE 1/4 SW 1/4	3	T 4 S	R 2 (E) W

2. Distance and direction from nearest town or city: 3 N - 6 W

Street address of well location if in city: LINN

3. Owner of well: NEIL BISPING
R.R. or street: ROUTE #2
City, state, zip code: LINN, KANSAS 66953

4. Locate with "X" in section below:



Sketch map:

6. Bore hole dia. 8 in. Completion date
Well depth 200 ft. 9-6-77

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: X Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material PVC Height (Above) or below
Threaded ___ Welded X Surface 12 in.
RMP ___ PVC X Weight 3 lbs./ft.
Dia. 5 in. to 200 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. 1258

5. Type and color of material	From	To
TOPSOIL	0	3
BROWN CLAY	3	8
RED CLAY	8	13
SANDROCK	13	18
RED CLAY	18	44
BLUE CLAY	44	55
RED CLAY	55	135
BLUE CLAY	135	148
SANDROCK	148	163
HARD ROCK	163	164
SANDROCK	164	200
STOP	200	

(Use a second sheet if needed)

10. Screen: Manufacturer's name PUMPCO
Type PVC Dia. 5
Slot/gauze 1/16 Length 20'
Set between 180 ft. and 200 ft.
___ ft. and ___ ft.
Gravel pack? YES Size range of material 1/8 x 1/4

11. Static water level: mo./day/yr.
140 ft. below land surface Date 9-6-77

12. Pumping level below land surfaces:
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 50 g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes X No Date

14. Well head completion:
__ Pitless adapter 12 Inches above grade

15. Well grouted? YES
With: X Neat cement __ Bentonite __ Concrete
Depth: From 3 ft. to 19 ft.

16. Nearest source of possible contamination:
ft. 700 Direction WEST Type LOTS
Well disinfected upon completion? X Yes __ No

17. Pump: X 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

18. Elevation: 1453'
Topography:
__ Hill
__ Slope
X Upland
__ 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.
Geo Cox & Sons Inc 258
Business name License No.
Address CLIFTON, KANS 66937
Signed Wayne Cox Date
Authorized representative 9-6-77

T 4 R 2 (E) W Sec 3 1/4 SW 1/4 SE 1/4 SW

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

Form WWC-5

MI-1023