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

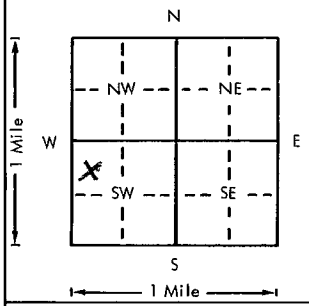
1. Location of well:	County: Washington	Fraction: SW1/4 NW1/4 SW1/4	Section number: 32	Township number: T 5 S	Range number: R 1 (E) W

2. Distance and direction from nearest town or city: 3 W 1/2 N of Clifton
Street address of well location if in city:

3. Owner of well: Harold Elsasser
R.R. ~~or street~~: #1
City, state, zip code: Clifton Kansas 66937

4. Locate with "X" in section below:

Sketch map:



6. Bore hole dia. 8 in. Completion date
Well depth 60 ft. 10-6-78

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
Threaded ___ Welded ___
RMP ___ PVC X
Dia. 5 in. to 60 ft. depth
Dia. ___ in. to ___ ft. depth
Height: Above ~~or below~~ Surface 12 in.
Weight 3 lbs./ft.
Wall Thickness: inches or ~~gage No.~~ .258

5. Type and color of material	From	To
top soil + clay	0	16
sand + gravel	16	18
gravel	18	60
(Use a second sheet if needed)		

10. Screen: Manufacturer's name Pumpco
Type PVC Dia. 5"
Slot/~~gauze~~ 1/16 Length 10
Set between 50 ft. and 60 ft.
___ ft. and ___ ft.
Gravel pack? YES Size range of material 1/8-1/4

11. Static water level: mo./day/yr.
23 ft. below land surface Date 10-6-78

12. Pumping level below land surfaces:
40 ft. after 1 hrs. pumping 40 g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 100 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 0 ft. to 10 ft.

16. Nearest source of possible contamination: NONE
ft. ___ Direction ___ Type
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:
Topography:
__ Hill
__ Slope
__ Upland
X 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.
Cox-Beswick 361
Business name License No.
Address Clifton, Kansas
Signed Francis Cox Date 10-28-78
Authorized representative

T 5 R 1 (E) W Sec 32 1/4 SW 1/4 NW 1/4 SW 1/4

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

Form WWC-5

MI-1023