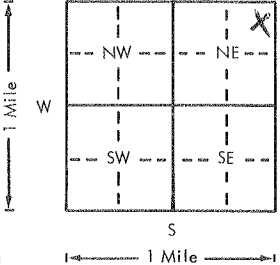


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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>CLAY</u>	Fraction <u>NE 1/4 NE 1/4 NE 1/4</u>	Section number <u>3</u>	Township number T <u>6</u> S R	Range number <u>1</u> <u>SE</u>
2. Distance and direction from nearest town or city: <u>1 WEST</u>			3. Owner of well: <u>RICHARD JAMES</u>		
Street address of well location if in city: <u>CLIFTON</u>			R.R. or street: City, state, zip code: <u>CLIFTON, KANSAS 66937</u>		
4. Locate with "X" in section below: N 1 Mile W E S 1 Mile			Sketch map: 		
5. Type and color of material			From	To	6. Bore hole dia. <u>8</u> in. Completion date <u>4-3-78</u> Well depth <u>50</u> ft. 54
<u>TOPSOIL</u>			<u>0</u>	<u>3</u>	7. <input checked="" type="checkbox"/> 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
<u>BROWN CLAY</u>			<u>3</u>	<u>30</u>	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
<u>SAND</u>			<u>30</u>	<u>35</u>	9. Casing: Material <u>PVC</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>3</u> lbs./ft. Dia. <u>5</u> in. to <u>50</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>50</u> ft. depth gage No. <u>1258</u>
<u>COARSE GRAVEL</u>			<u>35</u>	<u>50</u>	10. Screen: Manufacturer's name <u>PUMPCO</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>1/4</u> Length <u>10'</u> Set between <u>40</u> ft. and <u>50</u> ft. ft. and <u>50</u> ft. Gravel pack? <u>YES</u> Size range of material: <u>1/4 X 1/4</u>
<u>STOP</u>			<u>50</u>		11. Static water level: <u>14</u> ft. below land surface Date <u>4-3-78</u> mo./day/yr.
					12. Pumping level below land surfaces: ft. after <u>1 1/2</u> hrs. pumping <u>14</u> g.p.m. ft. after <u>1 1/2</u> hrs. pumping <u>14</u> g.p.m. Estimated maximum yield <u>50</u> g.p.m.
					13. Water sample submitted: <u>YES</u> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date
					14. Well head completion: Pitless adapter <u>12</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: <u>SEPTIC</u> ft. <u>50</u> Direction <u>SW</u> Type <u>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 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
(Use a second sheet if needed)					
18. Elevation:	19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	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>DARYL COX & SONS INC 359</u> Business name License No. Address <u>CLIFTON, KANS 66937</u> Signed <u>Daryl Cox</u> Date <u>4-5-78</u> Authorized representative				

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

Form WWC-5