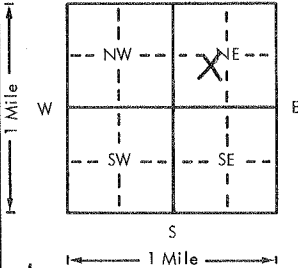


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 SW 1/4 NE 1/4</u>	Section number <u>10</u>	Township number <u>6</u> S R <u>1</u> E/W	Range number
2. Distance and direction from nearest town or city: <u>1.5 of Clifton</u>	3. Owner of well: <u>Laverne Turner</u>		R.R. or street: <u>Clifton, Kansas 66937</u>		
Street address of well location if in city:		City, state, zip code: <u>Clifton, Kansas 66937</u>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>32</u> in. Completion date <u>12-23-76</u> Well depth <u>61</u> ft.	
				7. <input 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 checked="" type="checkbox"/> Reverse rotary	
8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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>AC</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>34</u> lbs./ft. Dia. <u>16</u> in. to <u>61</u> ft. depth Wall Thickness: inches or Dia. <u>16</u> in. to <u>61</u> ft. depth gage No. <u>3/4</u>			
9. Type and color of material		From	To	10. Screen: Manufacturer's name <u>Johnson</u> <u>Concrete</u> Type <u>Transit</u> Dia. <u>16</u> Slot/gauze <u>1/8</u> Length <u>26</u> Set between <u>35</u> ft. and <u>61</u> ft. Gravel pack? <u>YES</u> Size range of material <u>1/2-1/4</u>	
<u>See #19</u>				11. Static water level: <u>8</u> ft. below land surface Date <u>12-23-76</u>	
				12. Pumping level below land surfaces: <u>NO TEST</u> ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <u>2000</u> g.p.m.	
				13. Water sample submitted: <u>YES</u> mo./day/yr. ____ Yes <input checked="" type="checkbox"/> No Date ____	
				14. Well head completion: <u>12</u> inches above grade ____ Pitless adapter	
				15. Well grouted? <u>YES</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
				16. Nearest source of possible contamination: <u>NONE</u> ft. ____ Direction ____ Type ____ Well disinfected upon completion? ____ Yes <input checked="" 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:	19. Remarks: <u>replacement well</u> <u>no test or test pumping</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>Earl Cox long time</u> <u>258</u> Business name License No. Address <u>Clifton Kansas</u> Signed <u>Thomas Cox</u> Date <u>12-23-76</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley					

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

Form WWC-5