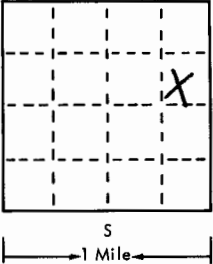


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

1 Location of well:	County <b>POTAWATOMIE</b>	Township name <b>Grant</b>	Fraction <b>NE 1/4</b>	Section number <b>29</b>	Town number <b>6</b>	Range number <b>12 E</b>	
Distance and direction from nearest town or city: <b>1 mi WEST 1/4 S</b>			3 Owner of well: <b>VERN McNEIL</b>				
Street address of well location if in city: <b>OF HAVENSVILLE, KS.</b>			Address: <b>CIRCLEVILLE, KANS.</b>				
Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		4 Well depth: <b>35</b> ft. Date of completion Well diameter <b>8</b> in. <b>4-24-75</b>			
2 Type and color of material		From To		5 <input 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			
				6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>			
				7 Casing: Material <b>PVC</b> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>24</b> in. Diam. Weight <b>2.33</b> lbs./ft. <b>5</b> in. to <b>35</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
				8 Screen: <b>Pump Co.</b> Manufacturer <b>PVC</b> Dia. <b>5"</b> Type <b>PVC</b> Slot <b>1/8"</b> Length <b>5'</b> Set between <b>30</b> ft. and <b>35</b> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>1/4"</b>			
				9 Static water level: <b>NOT MEASURED</b> ft. below land surface Date			
(use a second sheet if needed)				10 Pumping level below land surfaces: <b>AIR TEST</b> ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield <b>30</b> g.p.m.			
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date			
				12 Well head completion: <b>CAPED</b> <input type="checkbox"/> Pitless adapter <b>50</b> inches above grade			
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From <b>0</b> ft. to <b>10</b> ft.			
				14 Nearest source of possible contamination: ft. <b>300</b> Direction <b>NORTH</b> Type <b>SEPT TANK</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
16 Remarks: elevation <b>1140'</b> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name Model number HP Volts Length of drop pipe ft. capacity g.m.p. 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			
				17 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. <b>Strader Drilling Co. Inc. 182</b> Business name License No. Address <b>81-758 Hutton, Kans.</b> Signed <b>Dale Osburn</b> Date <b>4-24-75</b> Authorized representative			

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5