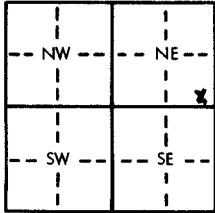
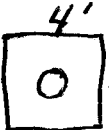


USE TYPEWRITER OR BALL
POINT PEN—PRESS FIRMLY,
PRINT CLEARLY.

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 Pottawatomie	Fraction SE 1/4 SE 1/4 NE 1/4	Section number 11	Township number T 7 S	Range number R 11 E
2. Distance and direction from nearest town or city: 1 mile South 1/2 E of Onaga, KANSAS Street address of well location if in city:				3. Owner of well: Wayne Zabel FARM R.R. or street: City, state, zip code: ONAGA, KANSAS 66521		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 		6. Bore hole dia. 10 in. Completion date OCT. 9, 1976 Well depth 65 ft.		
5. Type and color of material		From		To		7. <input checked="" 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 type="checkbox"/> Reverse rotary
						8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
						9. Casing: Material PST Height: Above or below Threaded <input type="checkbox"/> Welded GLW Surface 30 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 30 lbs./ft. Dia. 5 in. to 65 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 280
						10. Screen: Manufacturer's name Slot by Driller Type PVC Dia. 5" Slot/gauze 1/8" Length 30 Set between 35 ft. and 65 ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> YES Size range of material 1/8" - 1/2"
						11. Static water level: <input type="checkbox"/> mo./day/yr. 20 ft. below land surface Date 10-9-76
						12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.
						13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____
						14. Well head completion: <input type="checkbox"/> Pitless adapter ____ Inches above grade
						15. Well grouted? <input checked="" type="checkbox"/> YES With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 5 ft. to 15 ft.
						16. Nearest source of possible contamination: ft. 200' Direction EAST Type Stock Pens 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
						18. Elevation:
						19. Remarks: Cement Slab To be poured By Customer  4" Thick
						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. Shaper Drilling Service License No. 176 Business name Shaper Drilling Service Address 664 11 Signed Shaper Date 10-9-76 Authorized representative
						(Use a second sheet if needed)

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

Form WWC-5