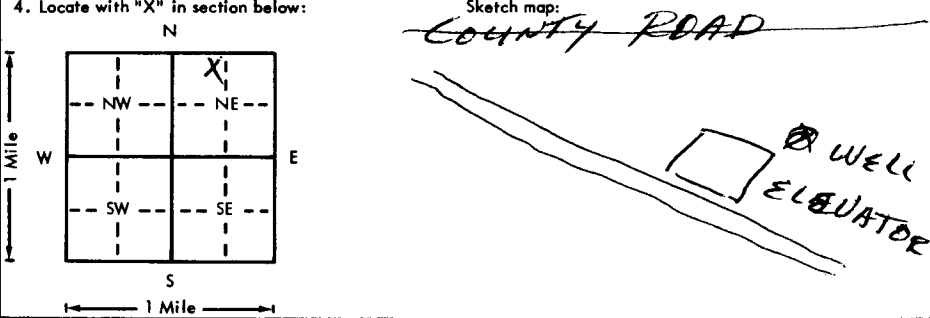


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 CLAY Fraction NE 1/4 NW 1/4 NE 1/4 Section number 29 Township number T 9 S R 1 EW	
2. Distance and direction from nearest town or city: IN OAKHILL 3. Owner of well: EVANS GRAIN CO Street address of well location if in city: UNKNOWN R.R. or street: OAKHILL GRAIN CO City, state, zip code: OAKHILL, KANS 67472	
4. Locate with "X" in section below: Sketch map: COUNTY ROAD 	
6. Bore hole dia. 8 in. Completion date 2/20/76 Well depth 58 ft.	
7. <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	
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	
9. Casing: Material PVC Height Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 15 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 3 lbs./ft. Dia. 3 in. to 58 ft. depth Wall Thickness: inches of Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gage No. 1607	
10. Screen: Manufacturer's name CERTAINTEED Type PVC Dia. 5" Slot/gauze 1/4" Length 30' Set between 20 ft. and 40 ft. 58 ft. and 48 ft. Gravel pack? <input checked="" type="checkbox"/> YES Size range of material 1/8 x 1/4	
11. Static water level: <input type="checkbox"/> mo./day/yr. 20 ft. below land surface Date 2/20/76	
12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 6 g.p.m.	
13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/> mo./day/yr.	
14. Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> 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 0 ft. to 10 ft.	
16. Nearest source of possible contamination: 500 ft. Direction WEST Type SEPTIC Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ 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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> 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. BOB COXT SANS 11K 258 Business name _____ License No. _____ Address GAFFTON, KANSAS Signed David Cox Date 2/23/76 Authorized representative	

-9
 -1-0
 -29
 NE 1/4 NW 1/4
 Sec 29

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

Form WWC-5