

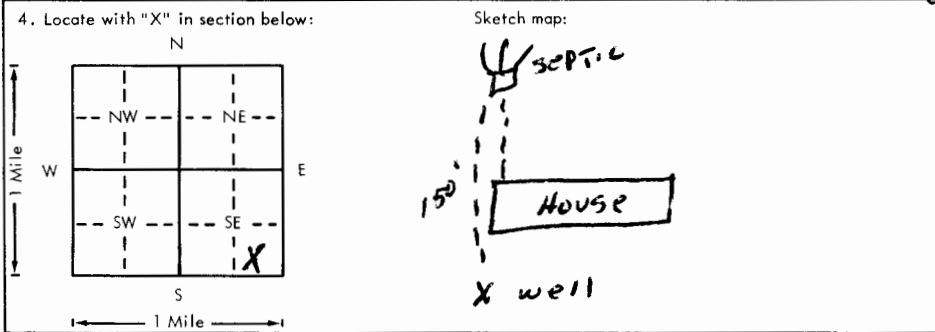
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 POTAWATOMIE Fraction SE 1/4 SE 1/4 SE 1/4 Section number 32 Township number T 9 S R 10 E Range number 10 EW

2. Distance and direction from nearest town or city: .8 N .9 W
Street address of well location if in city: CF Wamego
3. Owner of well: ELBERT SPAIN CONSTRUCTION
R.R. or street: 902 WALNUT
City, state, zip code: WAMEGO, KS 66547



6. Bore hole dia. 10 in. Completion date _____
Well depth 80 ft. 4-10-79

7. Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored Reverse rotary

8. Use: Domestic Public supply Industry
 Irrigation Air conditioning Stock
 Lawn Oil field water Other

9. Casing: Material PVC Height: Above or below
Threaded _____ Welded _____ Surface 24 in.
RMP _____ PVC 9L Weight 2.92 lbs./ft.
Dia. 5 in. to 80 ft. depth; Wall Thickness: inches or
Dia. _____ in. to _____ ft. depth; Gage No. 1250

5. Type and color of material	From	To
<u>Top soil</u>	<u>0</u>	<u>5</u>
<u>Clay, brown</u>	<u>5</u>	<u>55</u>
<u>Fine sand, coarse sand, medium gravel</u> <u>water bearing</u>	<u>55</u>	<u>70</u>
<u>Shale, grey</u>	<u>70</u>	<u>80</u>
(Use a second sheet if needed)		

10. Screen: Manufacturer's name Pumpco MPI
Type PVC Dia. 5
Slot gauze .020 Length 10
Set between 60 ft. and 70 ft.
Gravel pack? Size range of material .030x.060

11. Static water level: _____ mo./day/yr.
50 ft. below land surface Date 4-10-79

12. Pumping level below land surfaces:
_____ ft. after _____ hrs. pumping _____ g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield _____ 20 _____ g.p.m.

13. Water sample submitted: _____ mo./day/yr.
Yes No Date _____

14. Well head completion: CAP
24 Pitless adapter _____ inches above grade

15. Well grouted?
With: Neat cement Bentonite Concrete
Depth: From 5 ft. to 15 ft.

16. Nearest source of possible contamination:
ft. 150 Direction N Type SEPTIC
Well disinfected upon completion? Yes No

17. Pump: 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

18. Elevation: _____
Topography: Hill _____ Slope _____ Upland _____ Valley _____

19. Remarks: OWNED TO INSTALL SLAB

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.
STRADEE DRUG CO INC 192
Business name License No.
Address 271 Holton, KS
Signed Dale Dekim Date 4-11-79
Authorized representative

T 9 S R 10 E Sec 32 SE SE SE