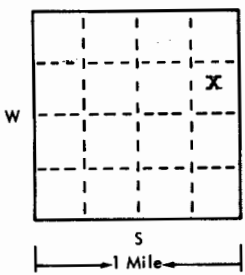


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Osborne</b>	Township name <b>Natoma</b>	Fraction <b>SE 1/4=NE 1/4</b>	Section number <b>8</b>	Town number <b>10</b>	Range number <b>15 W</b>
Distance and direction from nearest town or city: <b>1/2 mi East</b> <b>1 mi. North of</b> <b>Natoma</b>				3 Owner of well: <b>Bill Seaman</b> Address: <b>Natoma, Kansas</b>		
Locate with "X" in section below: 				Sketch map: <b>Well is 100' North and East</b> <b>of dwelling</b>		
2				4 Well depth: <b>37</b> ft. Date of completion <b>10/6</b> Well diameter <b>10</b> in.		
Type and color of material				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		
From To				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		
Top Soil 0 3				7 Casing: Material <b>PVC</b> Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. Diam. <b>2</b> in. to <b>24</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>2</b> in. to <b>24</b> ft. depth!		
Brown Clay 3 23				8 Screen: Manufacturer _____ Type _____ Dia. _____ Slot/gauze <b>1/8</b> slots <b>19</b> ft. and <b>24</b> ft. _____ Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>1/8"</b>		
White limestone 23 25				9 Static water level: <b>22</b> ft. below land surface Date <b>10/6/75</b>		
White gravel and rock 25 29				10 Pumping level below land surfaces: <b>26</b> ft. after <b>8</b> hrs. pumping <b>3</b> g.p.m. <b>26</b> ft. after <b>8</b> hrs. pumping <b>3</b> g.p.m. Estimated maximum yield <b>3</b> g.p.m.		
Blue Shale 29 37				11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____		
(use a second sheet if needed)				12 Well head completion: <input type="checkbox"/> Pitless adapter <b>12</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>11</b> ft. to <b>0</b> ft.		
				14 Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				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		
16 Remarks: elevation <b>Owner is going to put in curb</b> <b>and grade</b>				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>Rush Water Well Service</b> Business name <b>Natoma, Kans.</b> License No. <b>67651</b> Address <b>Natoma, Kans.</b> Signed <b>[Signature]</b> Date <b>11/15</b> Authorized representative		

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

Form WWC-5