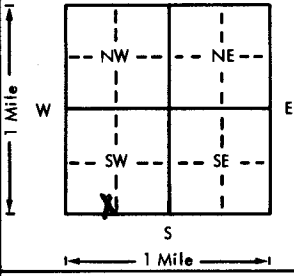


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Sheridan	Fraction SE 1/4 SW 1/4 SW 1/4	Section number 10	Township number T 10 S	Range number R 28 EW
2. Distance and direction from nearest town or city: Street address of well location if in city:				3. Owner of well: George Schippers R.R. or street: City, state, zip code: Grainfield, Kansas 67737		
4. Locate with "X" in section below: Sketch map: 				6. Bore hole dia. 8 in. Completion date _____ Well depth 100 ft. 9-17-76		
5. Type and color of material				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 plastic Height: above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 1 1/2 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 100 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____		
				10. Screen: Manufacturer's name Peerless Plastic Pipe Type PVC Dia. 5 in. Slot/gauze _____ Length 20 ft Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? yes Size range of material 1/4 down		
				11. Static water level: _____ mo./day/yr. 60 ft. below land surface Date 9-17-76		
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 10 g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> With: clay cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 20 ft.		
				16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? _____ Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
				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		
				(Use a second sheet if needed)		
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input checked="" 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. Aqua Well Drilling 281 Business name License No. Address Gove, Kansas 67736 Signed J. M. Justice Date 6-20-77 Authorized representative		

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

Form WWC-5