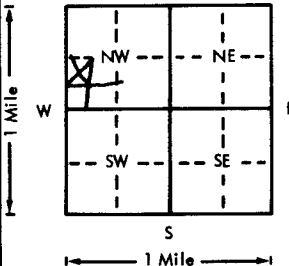


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215  
**BCB**

Kansas Department of Health and Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

1. Location of well: <i>House</i>		County <i>Cherokee</i>	Fraction <i>NW 1/4 SW 1/4 NW 1/4</i>	Section number <i>13</i>	Township number T <i>10</i>	Range number S R <i>30</i> E/W
2. Distance and direction from nearest town or city: <i>3 1/2 N</i> Street address of well location if in city: <i>Grinnell</i>				3. Owner of well: <i>L. W. Keeter</i> R.R. or street: <i>R.R.</i> City, state, zip code: <i>Grinnell KS 67738</i>		
4. Locate with "X" in section below: N  W E S 1 Mile				Sketch map:		
5. Type and color of material				From	To	6. Bore hole dia. <i>9</i> in. Completion date <i>10-9-76</i> Well depth <i>172</i> ft.
<i>Top soil</i>				<i>0</i>	<i>38</i>	7. 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
<i>sandy clay</i>				<i>38</i>	<i>81</i>	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
<i>gravel</i>				<i>81</i>	<i>86</i>	9. Casing: Material <input type="checkbox"/> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <i>4' 4</i> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft.
<i>sandy clay</i>				<i>86</i>	<i>91</i>	Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth   Wall Thickness: inches or Dia. <i>5</i> in. to <i>172</i> ft. depth   gage No. <i>200</i>
<i>S.S.</i>				<i>91</i>	<i>93</i>	10. Screen: Manufacturer's name <i>Grinnell</i> Type <i>PVC</i> Dia. <i>5"</i> Slot/gauze <i>1/32</i> Length <i>8'</i> Set between <i>164</i> ft. and <i>172</i> ft. ft. and <input type="checkbox"/> ft.
<i>sandy clay</i>				<i>93</i>	<i>103</i>	Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>1/8-1/4</i>
<i>gravel</i>				<i>103</i>	<i>107</i>	11. Static water level: <input type="checkbox"/> mo./day/yr. <i>98</i> ft. below land surface Date <i>10-9-76</i>
<i>sandy clay</i>				<i>107</i>	<i>113</i>	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 <i>30 +</i> g.p.m.
<i>fine sand</i>				<i>113</i>	<i>115</i>	13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date
<i>sandy clay</i>				<i>115</i>	<i>120</i>	14. Well-head completion: <input checked="" type="checkbox"/> Pitless adapter <i>12</i> inches above grade
<i>gravel</i>				<i>120</i>	<i>126</i>	15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <i>0</i> ft. to <i>10</i> ft.
<i>fine sand &amp; S.S.</i>				<i>126</i>	<i>131</i>	16. Nearest source of possible contamination: <i>None</i> ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<i>sandy clay</i>				<i>131</i>	<i>136</i>	17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <i>Grinnell</i> Model number <i>13EM</i> HP <i>1</i> Volts <i>230</i> Length of drop pipe <i>157</i> ft. capacity <i>12</i> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
<i>fine sand &amp; sandy clay</i>				<i>136</i>	<i>142</i>	
<i>sandy clay</i>				<i>142</i>	<i>166</i>	
(Use a second sheet if needed)						
18. Elevation:		19. Remarks: <i>BROCK 171'</i>				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		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. <i>L. W. Keeter</i> <i>298</i> Business name <i>Grinnell KS</i> License No. Address <i>Grinnell KS</i> Signed <i>L. W. Keeter</i> Date <i>7-27-76</i> Authorized representative				

T 10 30 E 13 NW SW NE 1/4 1/4 1/4

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

Form WWC-5

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	Fraction 1/4    1/4    1/4	Section number	Township number T                    S                    R	Range number E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: R.R. or street: City, state, zip code:		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. _____ in. Completion date _____ Well depth _____ ft.	
				7. <input 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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
5. Type and color of material			From	To	9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____
<i>gravel</i> <i>pebbles</i>			166	171	10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____
			171	172	11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date _____
					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: _____ mo./day/yr. Yes _____ No _____ Date _____
					14. Well head completion: _____ Pitless adapter _____ Inches above grade
					15. Well grouted? _____ With: _____ Neat cement _____ Bentonite _____ Concrete _____ Depth: From _____ ft. to _____ ft.
					16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ 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: <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)					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.  Business name _____ License No. _____ Address _____ Signed _____ Date _____ Authorized representative
18. Elevation:  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:				

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Form WWC-5