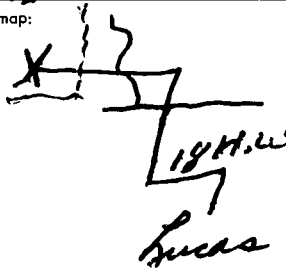


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Russell	Fraction NW 1/4 1/4 1/4	Section number 20	Township number T 11 S R 11 E/W	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city:		1 mi West 1 1/2 mi North Lucas		3. Owner of well: Mary Cooper R.R. or street: City, state, zip code: Lucas, Kansas 67648		
4. Locate with "X" in section below:		Sketch map: 			6. Bore hole dia. 5 1/2 in. Completion date 9-24-78 Well depth 171 ft.	
5. Type and color of material		From	To	7. <input checked="" 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		
yellow Post lime		0	30	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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
Black shale		30	68	9. Casing: Material <input type="checkbox"/> Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 20 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 171 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 2265		
sand & light gray shale		68	80	10. Screen: Manufacturer's name MPI Type PVC Dia. 5" Slot/gauze .025 Length 18 Set between 68 ft. and 78 ft. 90 ft. and 180 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/4" - 3/8"		
Brown Clay		80	95	11. Static water level: <input type="checkbox"/> mo./day/yr 66 ft. below land surface Date 9/25/78		
Pink sand rock		95	101	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 4 g.p.m.		
Red Clay		101	143	13. Water sample submitted: <input type="checkbox"/> mo./day/yr Yes <input checked="" type="checkbox"/> No Date		
White Clay		143	156	14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
Red Clay		156	169	15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 20 ft. 80-90		
Blue Clay		169	171	16. Nearest source of possible contamination: NNE 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		
(Use a second sheet if needed)				17. Pump: Windmill Nat installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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 checked="" type="checkbox"/> Other		
18. Elevation:	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. Small's Water Well/360 Business name 95 South Kansas License No. <input type="checkbox"/> Address Lucas, Kansas S: William K Wagner Date 9/25/78 Authorized representative			

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

Form WWC-5