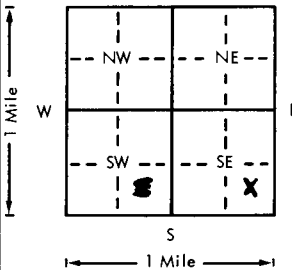


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 C 1/4 SE 1/4 SE 1/4	Section number 24	Township number T 11 S	Range number R 12 E/W
2. Distance and direction from nearest town or city: 5E 1S 1/8 E of Luray, Ks.			3. Owner of well: Ralph Goodheart R.R. or street: none City, state, zip code: Lucas, Kansas		
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. 9 7/8 Completion date _____ Well depth 43 ft. 5-9-78
Top soil			0	4	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
Brown Clay			4	19	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
Sand and gravel			19	31	9. Casing: Material pvc Height: Above ground 24 Threaded _____ Welded _____ Surface 24 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 1/4 in. to 43 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 258
Black river mud			31	35	10. Screen: Manufacturer's name certainTeed Type pvc Dia. 5 1/2 Slot/groove xxx 1/16 Length 16 Set between 27 ft. and 43 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/4 3/8
Sand and gravel w/clay streaks			35	42	11. Static water level: _____ mo./day/yr. 34 ft. below land surface Date 5-9-78
Red and white fire clay			42	45	12. Pumping level below land surfaces: 34 ft. after 1 hrs. pumping 10 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 10 + g.p.m.
Gray clay			45		13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date 5-9-78
					14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade
					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 15 ft.
					16. Nearest source of possible contamination: ft. 10mi Direction west Type cornell Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					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 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. Rosencrantz-Bemis 134 Business name _____ License No. _____ Address Great Bend, Ks 67530 Signed Sandy Kilgore Date 5-19-78 Authorized representative		

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

Form WWC-5