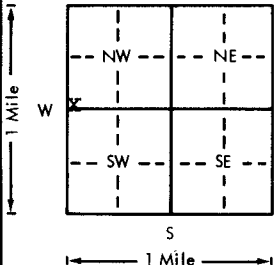


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Gove	Fraction SW 1/4 SW 1/4 NW 1/4	Section number 34	Township number T 11	Range number S R 26	DRL EW
2. Distance and direction from nearest town or city: 2 east 1 south of Quinter			3. Owner of well: Jim Boone R.R. or street: Quinter, Ks. 67752 City, state, zip code:			
4. Locate with "X" in section below: N W X E S 1 Mile		Sketch map: 		6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>102</u> ft. <u>4/7/78</u>		
5. Type and color of material		From		To		
		clay and silt		0		60
sand		60		83		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
clay		83		95		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
sand		95		97		9. Casing: Material _____ Height: <u>Above</u> or below Threaded _____ Welded _____ Surface <u>12</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>102</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>250</u>
rock		97		102		10. Screen: Manufacturer's name _____ <u>Pearles Plastics</u> Type <u>pvc</u> Dia. <u>5 in.</u> Slot/gauze <u>1/16</u> Length <u>30 ft.</u> Set between <u>72</u> ft. and <u>102</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 down</u>
						11. Static water level: _____ mo./day/yr. <u>68</u> ft. below land surface Date <u>4/7/78</u>
						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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
						14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade
						15. Well grouted? <input checked="" type="checkbox"/> With <u>Clay</u> neat cement _____ Bentonite _____ Concrete _____ Depth: From _____ ft. to <u>2</u> ft.
						16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ 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
						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. <u>Aqua Well Drilling</u> <u>281</u> Business name License No. Address <u>Gove, Ks. 67736</u> Signed <u>J M Little</u> Date <u>5-78</u> Authorized representative
18. Elevation:	19. Remarks:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5