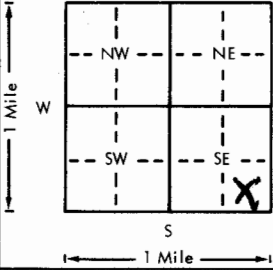


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

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1. Location of well: County LOGAN Fraction SE 1/4 SE 1/4 SE 1/4 Section number 14 Township number T 11 S R 32 E/W Range number 32	
2. Distance and direction from nearest town or city: 2 mi SO Street address of well location if in city: OF DAKLEY 3/4 mile E. 3. Owner of well: BOB SCOTT R2 R.R. or street: DAKLEY KS City, state, zip code: DAKLEY KS	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
6. Bore hole dia. 5 in. Completion date 12-19-78 Well depth 120 ft.	
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	
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	
9. Casing: Material <input type="checkbox"/> Height <input checked="" type="checkbox"/> Above or below Threading <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 100 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. 250	
10. Screens: Manufacturer's name JESS + LOWELL Type PVC Dia. 5" Slot/gauze 1/16 Length 20' Set between 100 ft. and 720 ft. Gravel pack? yes Size range of material 1/8-1/4	
11. Static water level: 77 ft. below land surface Date 12-19-78 mo./day/yr.	
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 <input type="checkbox"/> g.p.m.	
13. Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <input type="checkbox"/> mo./day/yr.	
14. Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Casing 12 inches above grade	
15. Well grouted? yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.	
16. Nearest source of possible contamination: 300 ft. Direction E Type SEPTIC TANK Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts 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 type="checkbox"/> Other	
(Use a second sheet if needed)	
18. Elevation: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: THIS IS NOT A FISHPOND WELL. IT IS A STOCK WELL.
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. SCOTT DRILLING Business name DAKLEY KS License No. Richard A. Scott 8-1-79 Address DAKLEY KS Signed Richard A. Scott 8-1-79 Date 8-1-79 Authorized representative	

T 11 S R 32 E W 14 SE SE SE

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

Form WWC-5