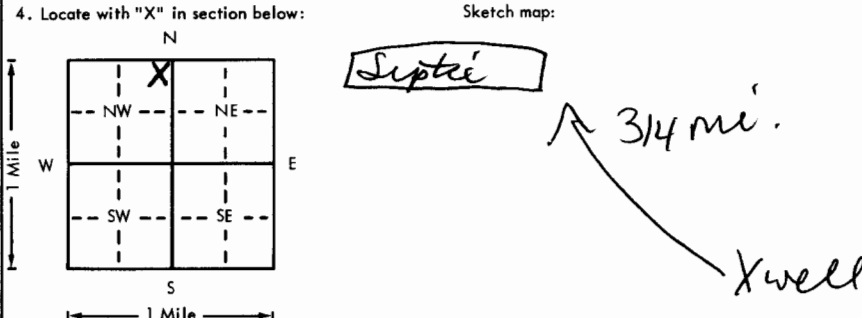


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

BAA

1. Location of well:	County Logan	Fraction NE 1/4 NE 1/4 NW 1/4	Section number 22	Township number T 11 S R 32 E W	Range number
2. Distance and direction from nearest town or city: 2S, 1/2W of Street address of well location if in city: Oakley, Kansas			3. Owner of well: D & B Drilling R.R. or street: Box 635 City, state, zip code: Great Bend, KS 67530		
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. 9 in. Completion date _____ Well depth 127 ft. 2-22-77		
5. Type and color of material			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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other		
			9. Casing: Material Plas. Height: above or below Threaded <input type="checkbox"/> Welded Glue Surface 12 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight 1.8 lbs./ft. Dia. 5 in. to 97 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 250		
			10. Screen: Manufacturer's name Jess & Lowell Type RMP Dia. 5 in. Slot gauze 1/16 Length 30 ft. Set between 77 ft. and 87 ft. 107 ft. and 127 ft. Gravel pack yes Size range of material 1/4-1/8		
			11. Static water level: _____ mo./day/yr. 69 ft. below land surface Date 2-22-77		
			12. Pumping level below land surfaces: NA _____ 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 <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
			14. Well head completion: <input type="checkbox"/> Pitless adapter 12 inches above grade		
			15. Well grouted? yes 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. 3960 Direction NW Type Septic 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		
18. Elevation:			19. Remarks: Well not finished by us, so don't know pumping level & well head completion		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input 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. Weishaar Drilling 23 Business name _____ License No. _____ Address Scott City, KS 67871 Signed [Signature] Authorized representative 7-77		

T 11 S R 32 E W
 Sec 22 NE 1/4 NW

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

Form WWC-5