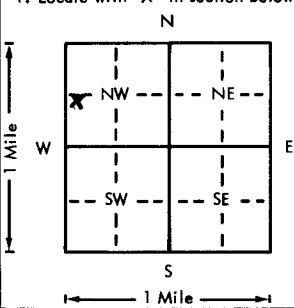
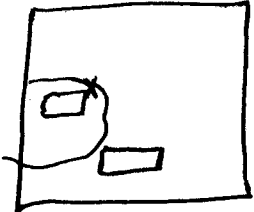


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 NW 1/4 SW 1/4 NW 1/4	Section number 9	Township number T 12 S	Range number R 26 E
2. Distance and direction from nearest town or city: 2.5 - 1 E of Quinter			3. Owner of well: Sam Flora R.R. or street: Quinter, Ks. 67752 City, state, zip code:		
4. Locate with "X" in section below: 			Sketch map: 		
5. Type and color of material			From	To	6. Bore hole dia. 8 in. Completion date _____ Well depth 56 ft. 5/10/77
silt + clay			0	25	7. <input checked="" 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
sand + clay			25	38	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 + gravel			38	56	9. Casing: Material pvc Height: above or below Threaded <input type="checkbox"/> Welded 81 Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 56 ft. depth Wall thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 250
shale			56		10. Screen: Manufacturer's name _____ Valley Steel Type PVC Dia. 5 in. Slot/gauze _____ Length 20 ft. Set between 36 ft. and 56 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1 down
					11. Static water level: _____ 25 ft. below land surface Date 5/10/77 ^{mo./day/yr.}
					12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 20 g.p.m.
					13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____
					14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade
					15. Well grouted? <input checked="" type="checkbox"/> With clay Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete _____ Depth: From 0 ft. to 20 ft.
					16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input 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. Aqua Well Drilling 281 Business name _____ License No. _____ Address Gove, Ks. 67736 Signed J m Little Date 6-20-77 Authorized representative		

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

Form WWC-5