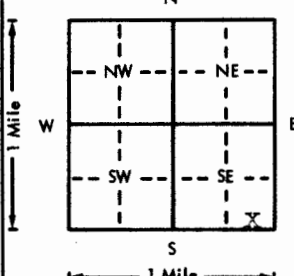


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

DDD Monument 7.5'

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

<input checked="" type="checkbox"/> Location of well:	County Logan	Fraction SE 1/4 SE 1/4 SE 1/4	Section number 8	Township number T 12 S R 34	Range number EW
2. Distance and direction from nearest town or city: 7.5 miles S. Page City, KS Street address of well location if in city: 5 mi. Sth + 2 East of Page City.			3. Owner of well: Carl Peterson R.R. or street: Monument, Kansas 67747 City, state, zip code:		
4. Locate with "X" in section below: N  W E S 1 Mile			6. Bore hole dia. 8 in. Completion date 5/12/77 Well depth 155 ft.		
5. Type and color of material			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		
			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		
			9. Casing: Material 21st Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 15 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 155 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 1 1/4		
			10. Screen: Manufacturer's name J and L Type RMP Dia. 5 in. Slot/gauze .032 Length 20' Set between 135 ft. and 155 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack yes Size range of material 1/8"		
			11. Static water level: <input type="checkbox"/> mo./day/yr. 61 ft. below land surface Date <input type="checkbox"/>		
			12. Pumping level below land surfaces: <input type="checkbox"/> ft. after NA 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 type="checkbox"/> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date <input type="checkbox"/>		
			14. Well head completion: open discharge <input type="checkbox"/> Pitless adapter <input type="checkbox"/> inches above grade		
			15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 4 ft. to 18 ft.		
			16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction NA Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
17. Pump: <input type="checkbox"/> Not installed Manufacturer's name Red Jacket Model number 9BC HP <input type="checkbox"/> Volts 230 Length of drop pipe 100 ft. capacity <input type="checkbox"/> g.p.m. Type: <input checked="" 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: 3185 Tps Topography: HW <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: BROCK 151'		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. Bartell Drilling 139 Business name License No. Address Winona, Kansas 67764 Signed Jayce Bartell Date 11/77 Authorized representative		

12345
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Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5