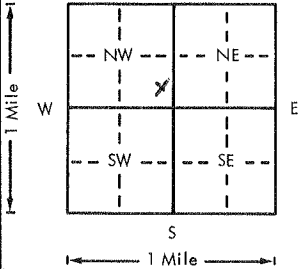
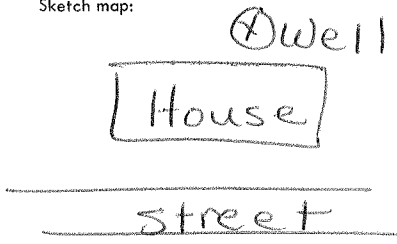


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <b>ELLIS</b>	Fraction <b>SE 1/4 SE 1/4 NW 34</b>	Section number <b>34</b>	Township number <b>T 13 S</b>	Range number <b>R 18 E/W</b>
2. Distance and direction from nearest town or city: Street address of well location if in city: <b>1702 Donald</b>			3. Owner of well: <b>Milton Dinger</b> R.R. or street: <b>1702 Donald</b> City, state, zip code: <b>Hays, Kansas 67601</b>			
4. Locate with "X" in section below: 		Sketch map: 		6. Bore hole dia. <b>9</b> in. Completion date <b>6/5/76</b> Well depth <b>40</b> ft.		
5. Type and color of material		From	To	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		
Topsoil		0	5	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
Brown Clay		5	20	9. Casing: Material <b>PVC</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>15</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>2.8</b> lbs./ft. Dia. <b>5</b> in. to <b>40</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>258</b>		
Medium Sand		20	35	10. Screen: Manufacturer's name <b>Jet Stream</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/gauze <input type="checkbox"/> Length <b>10"</b> Set between <b>29</b> ft. and <b>39</b> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <b>1/4"</b>		
Blue Shale		35	40	11. Static water level: <input type="checkbox"/> mo./day/yr. <b>30</b> ft. below land surface Date <b>6/5/76</b>		
				12. Pumping level below land surfaces: <b>30</b> ft. after <b>1</b> hrs. pumping <b>25</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>25</b> g.p.m.		
				13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
				14. Well head completion: <input type="checkbox"/> Pitless adapter <b>15</b> Inches above grade		
				<input checked="" type="checkbox"/> Well grouted? <b>Yes</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>1</b> ft. to <b>9</b> ft.		
				16. Nearest source of possible contamination: <b>None</b> ft. <input type="checkbox"/> Direction <input type="checkbox"/> 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 <b>F4W</b> Model number <b>58A8</b> HP <b>1/2</b> Volts <b>220</b> Length of drop pipe <b>35</b> ft. capacity <b>10</b> 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		
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		<b>None</b>  <input checked="" type="checkbox"/> 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. <b>Karst Water Well 1997</b> Business name <b>F4W</b> License No. <input type="checkbox"/> Address <b>E Hwy 40 Hays</b> Signed <b>CM B...</b> Date <b>6/5/76</b> Authorized representative				

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

Form WWC-5