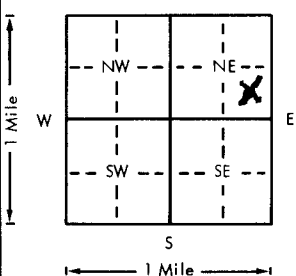


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Ellsworth Fraction 1/4 CSE 1/4 NE 1/4 Section number 10 Township number T 14 S R 10 NW Range number	
2. Distance and direction from nearest town or city: 3E 1 1/2 N Street address of well location if in city: Wilson, KS 3. Owner of well: RAY SOUKUP RI R.R. or street: Wilson, KS City, state, zip code:	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
	From To
Top Soil - Clay	0 20
Clay	20 140
SAND ROCK	140 172
6. Bore hole dia. 8 in. Completion date 7-25-77 Well depth 172 ft.	
7. <input 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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
9. Casing: Material _____ Height: Above <input checked="" type="checkbox"/> below _____ Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 172 ft. depth Wall Thickness: inches _____ Dia. _____ in. to _____ ft. depth gage No. Sec 40	
10. Screen: Manufacturer's name _____ Type PVC API Dia. 5" Slot/gauze 1/16" Length 20' Set between 152 ft. and 172 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/8-3/4"	
11. Static water level: _____ mo./day/yr. 110 ft. below land surface Date 7-25-77	
12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 10 g.p.m.	
13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____	
14. Well head completion: _____ Pitless adapter 12 Inches above grade	
15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.	
16. Nearest source of possible contamination: _____ ft. 50 Direction W Type Live Stock 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: _____ Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other _____	
(Use a second sheet if needed)	
18. Elevation:	19. Remarks:
Topography: <input checked="" type="checkbox"/> Hill _____ Slope _____ Upland _____ 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. 186 Kelly's Water Well Svc Business name _____ License No. _____ Address Rt 1 Great Bend, KS Signed Kelly Duce Date 7-7-79 Authorized representative

T 14 R 10 Sec 40 1/4 CSE 1/4 NE

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

Form WWC-5