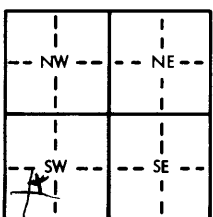
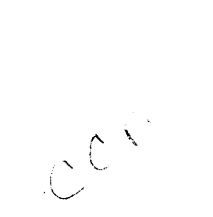


USE TYPEWRITER OR BALL
POINT PEN—PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82g-1201-1215

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

County: <u>SHAWNEE</u>		Fraction: <u>NE 1/4</u> <u>SW 1/4</u>	Section number: <u>26</u>	Township number: <u>T-15-</u>	Range number: <u>S R-24-W</u>
1. Location of well: <u>SHAWNEE</u>			3. Owner of well: <u>VERNON JOHNSON</u>		
2. Distance and direction from nearest town or city: <u>4 MILES</u>			R.R. or street: <u>RR 1</u>		
Street address of well location if in city: <u>N FALLON</u>			City, state, zip code: <u>SMOLAN KANSAS 67477</u>		
4. Locate with "X" in section below:  N W E S 1 Mile			Sketch map: 		
5. Type and color of material			From	To	6. Bore hole dia. <u>8</u> in. Completion date <u>12-7-77</u>
<u>TOP SOIL</u>			<u>0</u>	<u>5</u>	Well depth <u>45</u> ft.
<u>RED SHALE</u>			<u>5</u>	<u>15</u>	7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug
<u>HARD + SOFT GREEN SHALE</u>			<u>15</u>	<u>45</u>	<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 checked="" type="checkbox"/> Stock
					<input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
					9. Casing: Material <u>PVC</u> Height: <u>Above</u> or below
					Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>24</u> in.
					RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u> </u> lbs./ft.
					Dia. <u>4</u> in. to <u>31.5</u> ft. depth Wall Thickness: inches or
					Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u> </u>
					10. Screen: Manufacturer's name <u>PEERLESS</u>
					Type <u>PVC</u> Dia. <u>4"</u>
					Slot/gauze <u>1/32</u> Length <u>20'</u>
					Set between <u>25</u> ft. and <u>45</u> ft.
					<u> </u> ft. and <u> </u> ft.
					Gravel pack? <input checked="" type="checkbox"/> YES Size range of material <u>4 X 8</u>
					11. Static water level: <u>15</u> ft. below land surface Date <u>12-7-77</u>
					12. Pumping level below land surfaces:
					<u>38</u> ft. after <u>1</u> hrs. pumping <u>6</u> g.p.m.
					<u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m.
					Estimated maximum yield <u>4-6</u> g.p.m.
					13. Water sample submitted: <u> </u> mo./day/yr.
					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>
					14. Well head completion:
					<input type="checkbox"/> Pitless adapter <u>24</u> inches above grade
					<input checked="" type="checkbox"/> Well grouted? <u>YES</u>
					With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete
					Depth: From <u>0</u> ft. to <u>10</u> ft.
					16. Nearest source of possible contamination:
					ft. <u>1000</u> Direction <u>SOUTH</u> Type <u>HABS</u>
					Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					17. Pump: <input checked="" type="checkbox"/> Not installed
					Manufacturer's name <u> </u>
					Model number <u> </u> HP <u> </u> Volts <u> </u>
					Length of drop pipe <u> </u> ft. capacity <u> </u> 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:		
Topography:			<u>SLOPE IS AWAY FROM WELL</u>		
<input checked="" 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.		
			<u>PETERSON IRR.</u> <u>1384</u>		
			Business name <u> </u> License No. <u> </u>		
			Address <u>BOX 150 LINDSBURG KS 67456</u>		
			Signed <u>Ray Bohne</u> Date <u>12/7/77</u>		
			Authorized representative		

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

Form WWC-5

MI-1023