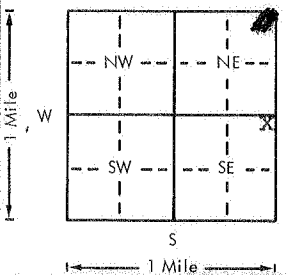


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Lane | Fraction N/E_{1/4} N/E_{1/4} S/E_{1/4} | Section number 35 | Township number T 16 S | Range number R 30 #E/W |
| 2. Distance and direction from nearest town or city: Street address of well location if in city: 1 E, 1 1/2 N of Healy, Kansas | | | | 3. Owner of well: R.R. or street: City, state, zip code: Sharp Brothers Healy, Kansas 67850 | | |
| 4. Locate with "X" in section below: Sketch map:  | | | | 6. Bore hole dia. 26 in. Completion date _____ Well depth 173 ft. 1/31/1978 | | |
| | | | | 7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary | | |
| | | | | 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 type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other | | |
| | | | | 9. Casing: Material steel Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface 10 in. RMP _____ PVC _____ Weight 31.67 lbs./ft. Dia. 16 in. to 153 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 188 | | |
| 5. Type and color of material | | From | To | 10. Screen: Manufacturer's name Cook Type galv. steel Dia. 16" Slot/gauze .100 Length 20" Set between 153 ft. and 173 ft. Gravel pack <input checked="" type="checkbox"/> yes Size range of material 3/4 dn. | | |
| Clay | | 0 | 19 | 11. Static water level: _____ mo./day/yr. 122 ft. below land surface Date 8/10/77 | | |
| Gyp | | 19 | 27 | 12. Pumping level below land surfaces: 161 ft. after 4 hrs. pumping 420 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 420 g.p.m. | | |
| Clay | | 27 | 53 | 13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____ | | |
| Fine sand clay | | 53 | 71 | 14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade | | |
| Sand rock H | | 71 | 80 | 15. Well grouted? <input checked="" type="checkbox"/> yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 15 ft. | | |
| Fine sand clay | | 80 | 102 | 16. Nearest source of possible contamination: ft. 5200 Direction East Type Farmstead Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Fine sand | | 102 | 122 | 17. Pump: _____ Not installed Manufacturer's name Western Land Roller Model number _____ HP _____ Volts _____ Length of drop pipe 165 ft. capacity 420 g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other | | |
| Sand coarse | | 122 | 132 | | | |
| Clay | | 132 | 145 | | | |
| Fine sand | | 145 | 153 | | | |
| Sand coarse | | 153 | 171 | | | |
| Yellow | | 171 | 175 | | | |
| (Use a second sheet if needed) | | | | | | |
| 18. Elevation: | | 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. Weishaar Drilling & Sup. 232 Business name _____ License No. _____ Address Sepp City, KS, 67871 Signed [Signature] Date 8/2/78 Authorized representative | | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley | | | | | | |

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

Form WWC-5