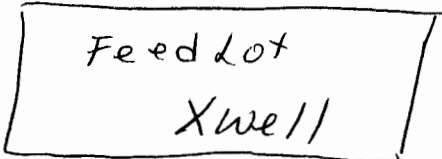


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Lane</b>	Fraction <b>NW 1/4 NE 1/4 NE 1/4</b>	Section number <b>7</b>	Township number <b>T 17 S R 30 E</b>	Range number <b>30 E</b>
2. Distance and direction from nearest town or city: <b>3 1/4 W of</b>			3. Owner of well: <b>Keith Cramer</b>		
Street address of well location if in city: <b>Healy, Kansas</b>			R.R. or street: <b>Healy, KS 67850</b>		
City, state, zip code: <b>Healy, KS 67850</b>					
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: 		
5. Type and color of material			6. Bore hole dia. <b>9</b> in. Completion date <b>7-6-77</b> Well depth <b>176</b> ft.		
			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 <b>Plas.</b> Height: <b>12</b> in. or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <b>1.8</b> lbs./ft. Dia. <b>5</b> in. to <b>156</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>250</b>		
			10. Screen: Manufacturer's name <b>Jess &amp; Lowell</b> Type <b>RMP</b> Dia. <b>5</b> in. Slot gauge <b>1/16</b> Length <b>20</b> ft. Set between <b>156</b> ft. and <b>176</b> ft. Gravel pack? <b>yes</b> Size range of material <b>1/4-1/8</b>		
			11. Static water level: <b>107</b> ft. below land surface Date <b>7-6-77</b>		
			12. Pumping level below land surfaces: <b>NA</b> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. 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"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
			14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>12</b> inches above grade		
			15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>15</b> ft.		
			16. Nearest source of possible contamination: <b>Feed Lot</b> ft. <input type="checkbox"/> Direction <b>In</b> Type <b>Lot</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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:			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. <b>Weishaar Drilling</b> <b>232</b> Business name License No. Address <b>Scott City, KS 67871</b> Signed <b>[Signature]</b> Date <b>8-18-77</b> Authorized representative		
19. Remarks: <b>Do not know pumping level since we did not install pump.</b>					

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

Form WW-C-5