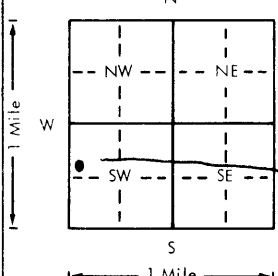


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>McPherson</b>	Fraction <b>SW 1/4 NW 1/4 SW 1/4</b>	Section number <b>14</b>	Township number T <b>17</b> S R <b>5</b> <span style="float:right">NW</span>	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: <b>Robert Loder</b> R.R. or street: <b>RR.I</b> City, state, zip code: <b>Marquette, Kansas</b>			
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: 		6. Bore hole dia. <b>8</b> in. Completion date <b>4-7-78</b> Well depth <b>40</b> ft.	
5. Type and color of material			From	To	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	
Top soil			0	5	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	
Gray clay			5	18	9. Casing: Material _____ Height: <input checked="" type="checkbox"/> Above or below Threaded _____ Welded _____ Surface <b>12</b> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <b>2</b> lbs./ft. Dia. <b>4</b> in. to <b>20</b> ft. depth Wall Thickness: inches or Dia. <b>4</b> in. to <b>40</b> ft. depth gage No. <b>Sch. 40</b>	
Fine sand and gray clay			18	28	10. Screen: Manufacturer's name <b>Peerless Plastics</b> Type <b>PVC</b> Dia. <b>4"</b> Slot/gauze <b>1/32</b> Length <b>10'</b> Set between <b>20</b> ft. and <b>30</b> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/4"</b>	
Blue and red shale			28	40	11. Static water level: _____ mo./day/yr. <b>10</b> ft. below land surface Date <b>4-7-78</b>	
					12. Pumping level below land surfaces: <b>12</b> ft. after <b>2</b> hrs. pumping <b>15</b> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>30-40</b> g.p.m.	
					13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
					14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> Inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From <b>0</b> ft. to <b>10</b> ft.	
					16. Nearest source of possible contamination: ft. <b>500</b> Direction <b>NW</b> Type <b>Cattle</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ 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: <input type="checkbox"/> Submersible _____ Turbine _____ <input type="checkbox"/> Jet _____ Reciprocating _____ <input type="checkbox"/> Centrifugal _____ Other _____	
			(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. <b>Peterson Tr. Inc. 139A</b> Business name License No. Address <b>Box 150 Lindsborg, Kansas</b> Signed <b>Mike Peterson</b> Date <b>4-10-78</b> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

T  
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C  
17-50  
14 SW NW SW

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

Form WWC-5