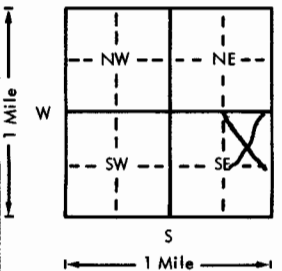


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 Rice TANGALT		Fraction S-E 1/4 NE 1/4 1/4	Section number 3.5	Township number T 18 S	Range number R 7 E (N)
X Distance and direction from nearest town or city: 1 mile north and 2 west of Little River Street address of well location if in city: Kans		3. Owner of well: max Crandal R.R. or street:		City, state, zip code: Little River Kans R2	
X Locate with "X" in section below: 		Sketch map:		6. Bore hole dia. 8 in. Completion date 6-10-76 Well depth 152 ft.	
5. Type and color of material		From	To	7. X 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 type="checkbox"/> Reverse rotary	
Soil		0	5	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 horses	
clay		5	30	9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____	
Sand clay		30	40	10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____	
Blue soap stone		40	90	11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date _____	
Red shale		90	152	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
Dry Hole Plugged				13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input type="checkbox"/> Date _____	
				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
				15. Well grouted? _____ With: _____ Neat cement _____ Bentonite _____ Concrete _____ Depth: From _____ ft. to _____ ft.	
				16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? Yes <input type="checkbox"/> No <input type="checkbox"/>	
				17. Pump: _____ Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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	
				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. Business name _____ License No. _____ Address _____ Signed _____ Date _____ Authorized representative	
18. Elevation:		19. Remarks:			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		Arthur Varney #147			

T 18
 R 7
 E 35
 SE 1/4
 NE 1/4