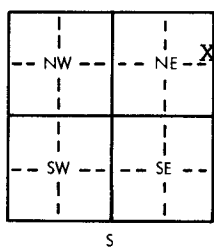


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

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

County <b>Pawnee</b>		Fraction <b>SE 1/4 NE 1/4 NE 1/4</b>		Section number <b>26</b>	Township number <b>T 20 S</b>	Range number <b>R 16 E</b>
2. Distance and direction from nearest town or city: <b>8 1/2 miles Northeast of Larned, KS</b> Street address of well location if in city:				3. Owner of well: <b>C. J. Mermis</b> R.R. or street: <b>Route 1</b> City, state, zip code: <b>Great Bend, KS 67530</b>		
4. Locate with "X" in section below: <div style="text-align: center;">N 1 Mile W 1 Mile E S 1 Mile</div> 				6. Bore hole dia. <b>9</b> in. Completion date <b>5-11-78</b> Well depth <b>120</b> ft.		
5. Type and color of material				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		
				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		
Top soil				9. Casing: Material <b>Styrene</b> Height <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>1.5</b> lbs./ft. Dia. <b>5</b> in. to <b>60</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>200</b>		
				10. Screen: Manufacturer's name <b>Jess &amp; Lowell</b> <b>Styrene 200</b> Dia. <b>5"</b> Slot/gauze <b>1/8"</b> Length <b>60'</b> Set between <b>60</b> ft. and <b>120</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <b>Yes</b> Size range of material <b>3/8-200</b>		
Brown clay & limestone				11. Static water level: <input type="checkbox"/> mo./day/yr. <b>57</b> ft. below land surface Date <b>5-11-78</b>		
Dakota clay				12. Pumping level below land surfaces: <b>Not Checked</b> <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.		
Dakota clay & sandstone streaks				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
				14. Well head completion: <input 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>10</b> ft.		
				16. Nearest source of possible contamination: <b>FIELD</b> ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> 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		
(Use a second sheet if needed)				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>Clarke Well &amp; Eq., Inc. 185</b> Business name <input type="checkbox"/> License No. <input type="checkbox"/> Address <b>Great Bend, KS 67530</b> Signed <b>[Signature]</b> Date <b>6-15-78</b> Authorized representative		
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5