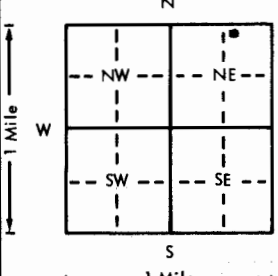


USE TYPEWRITER OR BALL
POINT PEN—PRESS FIRMLY,
PRINT CLEARLY.

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 Ness	Fraction NW 1/4 NE 1/4 NE 1/4	Section number 16	Township number T 20 S R 23 E/W	Range number
2. Distance and direction from nearest town or city: 9S - 1 1/2 E Street address of well location if in city: Ness City, Kans			3. Owner of well: Hollis Mauck R.R. or street: City, state, zip code: Ness City, Kansas 67560		
4. Locate with "X" in section below: N W E S 1 Mile Sketch map: 			6. Bore hole dia. 2 1/4 in. Completion date 3-8-77 Well depth 325 ft.		
5. Type and color of material			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 Steel Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 36.136 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight 36.136 lbs./ft. Dia. 16 in. to 325 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. .219		
			10. Screen: Manufacturer's name Lake Wood Type Mill Slot Dia. 16" Slot/gauze 1/8x 2 Length 125 Set between 200 ft. and 325 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? Yes Size range of material 1/4x1/2		
			11. Static water level: <input type="checkbox"/> mo./day/yr. 132 ft. below land surface Date 3-8-77		
(Use a second sheet if needed)			12. Pumping level below land surfaces: 750 317 ft. after 12 hrs. pumping 999 g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 999 750 g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
			14. Well head completion: <input type="checkbox"/> Pitless adapter 12 inches above grade		
			15. Well grouted? Yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
			16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type NA Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(Use a second sheet if needed)			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		
			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. High Plains Drilling & Supply Inc. 136A Business name Address 402 N 3rd Garden City, Ks Signed Ben D. Habner Date 3-21-77 Authorized representative		
			18. Elevation:		
			19. Remarks:		
			Topography: <input checked="" 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