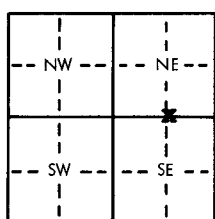


USE TYPEWRITER OR BALL  
POINT PEN—PRESS FIRMLY,  
PRINT CLEARLY.

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: <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"><b>Stafford</b></div>		County <b>Stafford</b>		Fraction <b>Center of East 1/2</b>		Section number <b>15</b>		Township number <b>T 21 S R 12 E W</b>		Range number <b>12</b>	
2. Distance and direction from nearest town or city: <b>10 miles Northeast of Hudson, KS</b> Street address of well location if in city:						3. Owner of well: <b>Stan Christiansen</b> R.R. or street: <b>Route 3</b> City, state, zip code: <b>Hudson, KS 67545</b>					
4. Locate with "X" in section below: <div style="text-align: center; margin-top: 10px;">N 1 Mile W E S 1 Mile</div> 						Sketch map:					
5. Type and color of material						From		To		6. Bore hole dia. <b>24</b> in. Completion date <b>3-8-77</b> Well depth <b>115</b> ft.	
top soil & sand						0		7		7. 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 checked="" type="checkbox"/> Reverse rotary	
sandy clay & sand						7		45		8. Use: Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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	
sand & gravel & clay streaks at 61'						45		65		9. Casing: Material <b>steel</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>30.3</b> lbs./ft. Dia. <b>16</b> in. to <b>55</b> ft. depth Wall Thickness: inches or Dia. <b>16</b> in. to <b>55</b> ft. depth gage No. <b>7 ga.</b>	
blue clay & sandstone						65		73		10. Screen: Manufacturer's name <b>Doerr</b> Type <b>Double-slot</b> Dia. <b>16"</b> Slot gauge <b>1/8</b> Length <b>60'</b> Set between <b>55</b> ft. and <b>115</b> ft. Gravel pack? <b>yes</b> Size range of material <b>3/8-200</b>	
sand & gravel & clay streak at 81' to 112'						73		115		11. Static water level: mo./day/yr. <b>15</b> ft. below land surface Date <b>11-24-77</b>	
										12. Pumping level below land surfaces: <b>N/C</b> ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield g.p.m.	
										13. Water sample submitted: mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date	
										14. Well head completion: 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. Direction Type Well disinfected upon completion? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
										17. Pump: <b>yes</b> Not installed Manufacturer's name <b>Peerless Pumps</b> Model number <b>12MB-4</b> HP <b>60</b> Volts <b>460</b> Length of drop pipe <b>60</b> ft. capacity <b>900</b> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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)											
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>Clarke Well &amp; EQ., Inc. 185</b> Business name License No. Address <b>Great Bend, KS 67530</b> Signed <b>[Signature]</b> Date <b>3-11-77</b> Authorized representative					

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

Form WWC-5