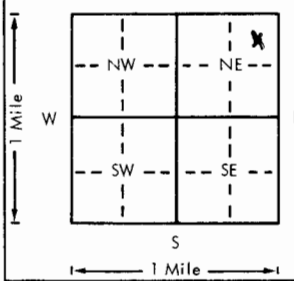


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

Andrew #1

1. Location of well: County <u>STAFFORD</u> Fraction <u>NW/4 NW/4 NE/4</u> Section number <u>1</u> Township number <u>T 21</u> Range number <u>S R 13</u> E/W	2. Distance and direction from nearest town or city: <u>BORTON & STAFFORD Co Line</u> Street address of well location if in city: <u>2 1/2 EAST</u>	3. Owner of well: <u>Duke Drq.</u> R.R. or street: City, state, zip code: <u>Great Bend, Kan</u>
4. Locate with "X" in section below: Sketch map: 		6. Bore hole dia. <u>9</u> in. Completion date <u>6-19-78</u> Well depth <u>60</u> ft.
5. Type and color of material		7. ☒ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary
		8. Use: ☐ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☒ Oil field water ☐ Other
		9. Casing: Material <u>PVC</u> Height: Above or below Threaded ☐ Welded ☒ Surface <u>12</u> in. RMP ☐ PVC ☐ Weight <u>287.3</u> lbs./ft. Dia. <u>5</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>60</u> ft. depth gage No. <u>200</u>
		10. Screen: Manufacturer's name <u>Shop made</u> Type <u>Saw</u> Dia. <u>5</u> Slot/gauze <u>1/8</u> Length <u>24</u> Set between <u>40</u> ft. and <u>60</u> ft. Gravel pack? ☒ Size range of material <u>14-18</u>
		11. Static water level: <u>18</u> ft. below land surface Date <u>6-19-78</u> mo./day/yr.
		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.
		13. Water sample submitted: ____ mo./day/yr. Yes ____ No ____ Date ____
		14. Well head completion: ____ Pitless adapter <u>12</u> inches above grade
		15. Well grouted? ☒ With: ☒ Neat cement ☒ Bentonite ☒ Concrete Depth: From <u>0</u> ft. to <u>24</u> ft.
		16. Nearest source of possible contamination: ft. ____ Direction ____ Type ____ Well disinfected upon completion? ____ Yes ____ No
		17. Pump: ☒ Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.p.m. Type: ☐ Submersible ☐ Turbine ☐ Jet ☐ Reciprocating ☐ Centrifugal ☐ Other
(Use a second sheet if needed)		
18. Elevation: Topography: ☐ Hill ☒ Slope ☐ Upland ☐ Valley	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. <u>Myers Water Well</u> <u>143</u> Business name License No. Address <u>645 S. 1st St.</u> Signed <u>Thayer Brundage</u> Date <u>6-19-78</u> Authorized representative	

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

Form WWC-5