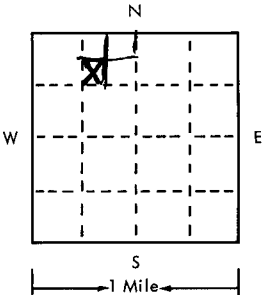


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County <u>Mepherson</u>	Township name <u>mound</u>	Fraction <u>SWNE NW</u>	Section number <u>28</u>	Town number <u>T21S</u>	Range number <u>R2W</u>
Distance and direction from nearest town or city: <u>1 1/2 W of</u>				3 Owner of well: <u>Merlin Kaufman</u>		
Street address of well location if in city: <u>Moundridge, Ks.</u>				Address: <u>Rt 2 Moundridge, Ks. 67107</u>		
Locate with "X" in section below: 				Sketch map:		
2				4 Well depth: <u>80</u> ft. Date of completion <u>7-21-75</u> Well diameter <u>10</u> in.		
				5 <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		
				6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input checked="" type="checkbox"/> <u>Fish pond</u>		
				7 Casing: Material <u>RMP</u> Height: <u>above</u> below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in. Diam. <u>6</u> in. to <u>80</u> ft. depth Weight <u>200</u> lbs./ft. Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				8 Screen: Manufacturer <u>Sunflower</u> Type <u>RMP</u> Dia. <u>6</u> Slot/gauze <u>3/16</u> Length <u>18</u> Set between <u>62</u> ft. and <u>80</u> ft. Fittings: <u>rd gravel</u> Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u> </u>		
				9 Static water level: <u>21</u> ft. below land surface Date <u>7-21-75</u>		
				10 Pumping level below land surfaces: <u>35</u> ft. after <u>12</u> hrs. pumping <u>15</u> g.p.m. ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>50</u> g.p.m.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>		
				12 Well head completion: <u>24"</u> <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade		
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> <u>concrete</u> Depth: From <u>0</u> ft. to <u>10</u> ft.		
				14 Nearest source of possible contamination: ft. <u>30</u> Direction <u>S</u> Type <u>pond</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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		
16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				17 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>Miller Waterwell 137</u> Business name <u>Hutchinson, Ks.</u> License No. <u> </u> Address <u> </u> Signed <u>Joe Miller</u> Date <u>8-4-75</u> Authorized representative		

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5