

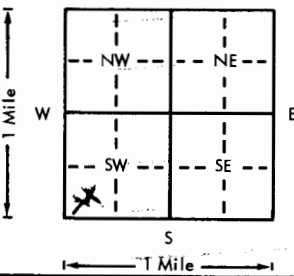
HORSE CANYON MI

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

CCC

1. Location of well:		County <b>HOPKEMAN</b>	Fraction <b>SW SW SW</b> 1/4 1/4 1/4	Section number <b>11</b>	Township number <b>T 21 S</b>	Range number <b>R 25 E</b>		
2. Distance and direction from nearest town or city: <b>10 MI NORTH + 8 MI WEST FROM JETHORE KS</b>			3. Owner of well: <b>J.D. NUSS</b> R.R. or street: City, state, zip code: <b>JETHORE KANSAS</b>					
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map: 			6. Bore hole dia. <b>8</b> in. Completion date <b>26-AUG-76</b> Well depth <b>65</b> 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 type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
From To			9. Casing: Material _____ Height: Above or below _____ Threaded _____ Welded _____ Surface <b>12</b> in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>55</b> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. <b>320</b>			10. Screen: Manufacturer's name _____ Type <b>STYRENE</b> Dia. <b>5"</b> Slot/gauze <b>1/16</b> Length <b>10</b> Set between <b>55</b> ft. and <b>65</b> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>#1</b>		
<b>BROWN CLAY</b>			<b>0 39</b>			11. Static water level: _____ mo./day/yr. <b>39</b> ft. below land surface Date <b>26-AUG-76</b>		
<b>GREY-BLUE CLAY</b>			<b>36 50</b>			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>60</b> g.p.m.		
<b>BLUE SAND + ROCK</b>			<b>50 60</b>			13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
<b>HARD BLACK SHALE</b>			<b>60 70</b>			14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>12</b> inches above grade		
<b>ROCK 60' RR.</b>						15. Well grouted? <b>YES</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>5</b> ft. to <b>14</b> ft.		
<b>39</b>						16. Nearest source of possible contamination: ft. <b>250</b> Direction <b>NE</b> Type <b>OLD WELL</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>21' set thick</b>						17. Pump: _____ Not installed Manufacturer's name <b>REDA</b> Model number <b>909P05T</b> HP <b>1/2</b> Volts <b>230</b> Length of drop pipe <b>60</b> ft. capacity <b>12</b> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
<b>in Alluvium</b>						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>243</b> <b>DEAN WATER HOUSE PRLC</b> Business name _____ License No. _____ Address <b>HANSTON KANSAS</b> Signed <b>Dean Waterhouse</b> Date <b>27</b> Authorized representative <b>SEPT 76</b>		
18. Elevation:			19. Remarks:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley			<b>2280</b> <b>60</b> <b>170</b> <b>TOTU</b>					

21 250 170  
R 25 E  
S 21 T  
SW 1/4 SW 1/4 SW 1/4

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

Form WWC-5