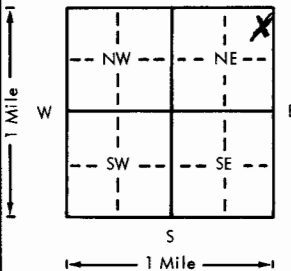


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 <u>McPherson</u>	Fraction <u>NE 1/4 NE 1/4 NE 1/4</u>	Section number <u>35</u>	Township number <u>21</u>	Range number <u>4</u>
2. Distance and direction from nearest town or city: Street address of well location if in city:	<u>1 3/4 N</u> <u>Inman</u>		3. Owner of well: <u>Gerald Kaufman</u> R.R. or street: <u>RR2</u> City, state, zip code: <u>Inman Ks. 67546</u>		
4. Locate with "X" in section below: Sketch map:			6. Bore hole dia. <u>9</u> in. Completion date <u>12-23-77</u> Well depth <u>90</u> ft.		
5. Type and color of material	From	To	7. <input checked="" type="checkbox"/> 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 type="checkbox"/> Reverse rotary		
<u>Top Soil</u>	<u>0</u>	<u>2</u>	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		
<u>Yellow Clay</u>	<u>2</u>	<u>26</u>	9. Casing: Material <u>PVC</u> Height Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>75</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>24</u> lbs./ft. Dia. <u>5</u> in. to <u>90</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>90</u> ft. depth gage No. <u>250</u>		
<u>Red Shale</u>	<u>26</u>	<u>42</u>	10. Screen: Manufacturer's name <u>Acme</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>20</u> Length <u>20</u> Set between <u>70</u> ft. and <u>90</u> ft. <u>70</u> ft. and <u>90</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>20</u>		
<u>Some Water</u>	<u>42</u>	<u>43</u>	11. Static water level: <u> </u> mo./day/yr. <u> </u> ft. below land surface Date <u> </u>		
<u>Red Shale</u>	<u>43</u>	<u>82</u>	12. Pumping level below land surfaces: <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u> </u> g.p.m.		
<u>Water</u>	<u>82</u>	<u>83</u>	13. Water sample submitted: <u> </u> mo./day/yr. <u> </u> Yes <u> </u> No Date <u> </u>		
<u>Red Shale</u>	<u>83</u>	<u>90</u>	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u> </u> inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <u> </u> Bentonite <u> </u> Concrete <u> </u> Depth: From <u>3</u> ft. to <u>13</u> ft.		
			16. Nearest source of possible contamination: <u>SEPT. 2</u> ft. <u>70</u> Direction <u>SE</u> Type <u>Leak</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <u> </u> No <u> </u>		
			17. 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 <u> </u> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <u> </u> <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <u> </u> <input type="checkbox"/> Other <u> </u>		
18. Elevation:	19. Remarks: <u>owner to run concrete</u> <u>slab around well</u> <u>4'x4'x4"</u>		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>Backhus Dr. 120</u> Business name <u> </u> License No. <u> </u> Address <u>Jampa Ks.</u> Signed <u>Paul Backhus</u> Date <u>12-23-77</u> Authorized representative <u> </u>		

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

Form WWC-5