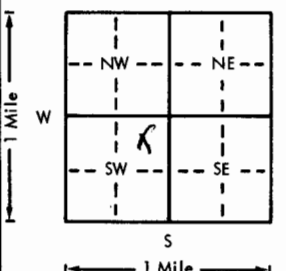


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>Rice</u>	Fraction: <u>1/4 NE 1/4 SW 1/4</u>	Section number: <u>31</u>	Township number: T <u>21</u> S	Range number: R <u>8</u> E/W
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>South Sterling 2 miles</u> <u>1 mile West</u>			3. Owner of well: <u>Sterling Shelling CO</u> R.R. or street: City, state, zip code: <u>Sterling Kans</u>		
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. <u>9</u> in. Completion date: <u>9-14-76</u> Well depth <u>60</u> ft.		
5. Type and color of material			7. <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		
			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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other		
From			9. Casing: Material <u>PVC</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>287.5</u> lbs./ft. Dia. <u>5</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dia. <u>  </u> in. to <u>  </u> ft. depth gage No. <u>1265</u>		
			10. Screens: Manufacturer's name <u>Shaw-Walsh</u> Type <u>PVC</u> Dia. <u>5</u> Slot <u>1/8</u> Length <u>20</u> Set between <u>040</u> ft. and <u>60</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>40/50</u>		
Clay			11. Static water level: <u>19</u> ft. below land surface Date <u>9-14-76</u> mo./day/yr.		
Sandy clay			12. Pumping level below land surfaces: <u>23</u> ft. after <u>1/2</u> hrs. pumping <u>70</u> g.p.m. <u>  </u> ft. after <u>  </u> hrs. pumping <u>  </u> g.p.m. Estimated maximum yield <u>150</u> g.p.m.		
Gravel			13. Water sample submitted: <u>  </u> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date <u>  </u>		
			14. Well head completion: <input type="checkbox"/> Pitless adapter <u>  </u> inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>10</u> ft. to <u>0</u> ft.		
			16. Nearest source of possible contamination: <u>None</u> ft. <u>  </u> Direction <u>  </u> Type <u>  </u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			17. Pump: <u>  </u> 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		
(Use a second sheet if needed)			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>Shaw-Walsh</u> Business name <u>Shaw-Walsh</u> License No. <u>143</u> Address <u>  </u> Signed <u>  </u> Date <u>  </u> Authorized representative		
18. Elevation:	19. Remarks:		20. Water well contractor's certification:		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

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

Form WWC-5