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

WATER WELL RECORD
KSA 82a-1201-1215

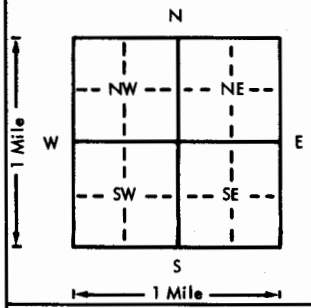
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Stafford	~~NW~~ NE/4 NW/4 NW/4	32	T 22 S	R 11 E (W)

2. Distance and direction from nearest town or city: [redacted] [redacted] 9 mi. N. & 2 1/4 mi. E. of
Street address of well location if in city: Stafford, Kansas

3. Owner of well: John Brock
R.R. or street: Stafford, Kansas
City, state, zip code: 67578

4. Locate with "X" in section below:



Sketch map: Well No. 2 (Duck Pond)

5. Type and color of material	From	To
Top soil	0	2
Brown clay	2	40
Silty Sand	40	60
Med. to coarse sand & gravel	60	95

(Use a second sheet if needed)

6. Bore hole dia. 12 in. Completion date ____
Well depth 93 ft. 10-1-76

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water X Other

9. Casing: Material PVC Height: Above or ~~below~~
Threaded ____ Welded ____ Surface 24 in.
RMP ____ PVC ____ Weight ____ lbs./ft.
Dia. [redacted] in. to [redacted] ft. depth Wall Thickness: inches or
Dia. 6 in. to 63 ft. depth gage No. 160 psi

10. Screen: Manufacturer's name PVC
Type [redacted] Dia. 6"
Slot/gauze 1/8" Length 30'
Set between 63 ft. and 93 ft.
____ ft. and ____ ft.
Gravel pack? X Size range of material 1/8 x 1/4

11. Static water level: mo./day/yr.
4 ft. below land surface Date 10/1/76

12. Pumping level below land surfaces: No Test
____ 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 X No Date ____

14. Well head completion:
__ Pitless adapter 24 Inches above grade

15. Well grouted? Yes
With: __ Neat cement __ Bentonite X Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination:
ft. 1200 Direction E Type Oil Wells
Well disinfected upon completion? X Yes __ No

17. Pump: X 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

18. Elevation:

Topography:
__ Hill
__ Slope
X Upland
__ Valley

19. Remarks: Well is not going to be used for potable purposes. Its only use is to supply water to a duck pond.

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.
Layne Western Co. 102
Business name License No.
Address Wichita, Kansas
Signed [signature] Date 10/4/76
Authorized representative

T 22 S R 11 E (W) Sec 32 1/4 NE 1/4 NW 1/4 NW 1/4

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

Form WWC-5

MI-1023