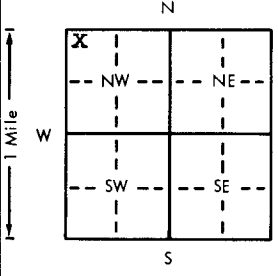


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Pawnee	Fraction nw 1/4 nw 1/4 nw 1/4	Section number 8	Township number T 22 S R 18 E	Range number 18 19 E
2. Distance and direction from nearest town or city: from Sanford, Ks. 2-S 3/4-W south side rd. Street address of well location if in city:			3. Owner of well: Thelma Price - Alan Converse R.R. or street: none City, state, zip code: Gargfield, Kansas 67529		
4. Locate with "X" in section below: 			Sketch map:		
5. Type and color of material			From	To	6. Bore hole dia. 29 in. Completion date 6-24-76 Well depth 111 ft.
top soil			0	2	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
brown clay			2	30	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
fine sand & gravel			30	35	9. Casing: Material steel Height: Above or below water Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 18 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 16 in. to 111 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 7
sand & gravel clean loose			35	45	10. Screen: Manufacturer's name Doerrs Type steel Dia. <input type="checkbox"/> Slot/gage 3/16 Length 32 Set between 79 ft. and 111 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/4 3/8
gray clay			45	48	11. Static water level: <input type="checkbox"/> mo./day/yr. 48 ft. below land surface Date 6-24-76
sand & gravel fine			48	57	12. Pumping level below land surfaces: na <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.
gray clay & fine sand			57	60	13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date 6-24-76
sand & gravel w/clay			60	77	14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade
sand & gravel clean coarse loose			77	111	15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <input type="checkbox"/> ft. to 10 ft.
blue gray clay			111	114	16. Nearest source of possible contamination: ft. 1000 Direction East Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
sand rock			114	115	17. Pump: Not installed Manufacturer's name W.L.R. Model number 2-12DHS HP 40 Volts <input type="checkbox"/> Length of drop pipe 100 ft. capacity <input type="checkbox"/> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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)					
18. Elevation:	19. Remarks:		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. Rosencrantz-Bemis 134 Business name License No. Address Great Bend, Kansas 67530 Signed L. Kilgore Date 6-19-76 Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

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

Form WWC-5