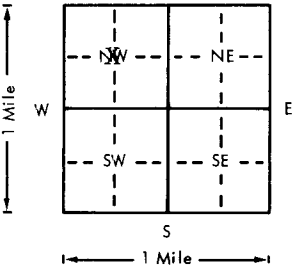


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 <b>Stafford</b>	Fraction 1/4	Center of 1/4 NW 1/4	Section number <b>26</b>	Township number T 23 S	Range number R <del>11</del> 13 E <b>W</b>
2. Distance and direction from nearest town or city: 2 1/2 miles Northeast of St. John, KS Street address of well location if in city:					3. Owner of well: <b>Kurt Fairchild</b> R.R. or street: <b>Route 3</b> City, state, zip code: <b>St. John, KS 67576</b>		
4. Locate with "X" in section below: N  W E S 1 Mile					Sketch map:		
5. Type and color of material					From	To	6. Bore hole dia. <u>24</u> in. Completion date <u>5-20-77</u> Well depth <u>85</u> ft.
Sandy top soil					0	4	7. <input 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 checked="" type="checkbox"/> Reverse rotary
Brown clay					4	10	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
Sand & gravel					10	30	9. Casing: Material <u>steel</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 type="checkbox"/> Weight <u>30.3</u> lbs./ft. Dia. <u>16</u> in. to <u>45</u> ft. depth Wall Thickness: inches or Dia. <u>   </u> in. to <u>   </u> ft. depth gage No. <u>7 ga.</u>
Yellow <del>red</del> clay					30	32	10. Screen: Manufacturer's name <u>Doerr</u> Type <u>Double-slot</u> Dia. <u>16"</u> Slot/gauze <u>1/8</u> Length <u>40'</u> Set between <u>45</u> ft. and <u>85</u> ft. <u>   </u> ft. and <u>   </u> ft. Gravel pack? <u>yes</u> Size range of material <u>3/8-200</u>
Sand & gravel					32	84	11. Static water level: <u>9' 6"</u> ft. below land surface Date <u>5-9-77</u> mo./day/yr.
Yellow clay					84	85	12. Pumping level below land surfaces: <u>N/C</u> <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.
							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>12</u> inches above grade
							15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.
							16. Nearest source of possible contamination: <u>FIELD</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>Not installed</u> Manufacturer's name <u>12LB-3 -PEERLESS</u> Model number <u>   </u> HP <u>80</u> Volts <u>   </u> Length of drop pipe <u>70</u> ft. capacity <u>900</u> 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)							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>Clarke Well &amp; Eq., Inc. 185</b> Business name <u>   </u> License No. <u>   </u> Address <u>Great Bend, KS 67530</u> Signed <u><i>C. W. Clarke</i></u> Date <u>5-24-77</u> Authorized representative
18. Elevation:		19. Remarks:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley							

23  
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Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5