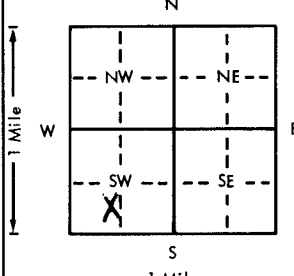


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Stafford	Fraction SE 1/4 SW 1/4 SW 1/4	Section number 24	Township number T 23	Range number S 14 E/W
2. Distance and direction from nearest town or city: 1 mi North 2 1/2 mi. west of Street address of well location if in city: St. John, Ks.			3. Owner of well: B & N Drilling Co. R.R. or street: Box 846 City, state, zip code: Independence, Ks. 67301			
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. 9 in. Completion date 5-10-77 Well depth 90 ft.			
5. Type and color of material			7. ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary			
			8. Use: ☐ Domestic ☐ Public supply ☒ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other			
			9. Casing: Material pvc Height: Above or below Threaded ☐ Welded ☒ Surface 18 in. RMP ☐ PVC ☒ Weight 160 lbs./ft. Dia. 4 in. to 90 ft. depth Wall Thickness: inches or Dia. ☐ in. to ☐ ft. depth gage No. 373-237			
			10. Screen: Manufacturer's name Certainteen Type pvc Dia. 4 Slot/g 1/16 Length 20 Set between 70 ft. and 90 ft. Gravel pack? ☒ Size range of material 3/4-3/8			
			11. Static water level: 32 ft. below land surface Date 5-10-77 mo./day/yr.			
(Use a second sheet if needed)			12. Pumping level below land surfaces: ____ 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 ☒ No ☐ Date ____			
			14. Well head completion: ____ Pitless adapter ____ inches above grade			
			15. Well grouted? no With: ____ Neat cement ____ Bentonite ____ Concrete Depth: From ____ ft. to ____ ft.			
			16. Nearest source of possible contamination: ft. 70 Direction South type oil well Well disinfected upon completion? ____ Yes ☒ No ☐			
18. Elevation: Topography: ☐ Hill ☐ Slope ☒ Upland ☐ Valley			17. Pump: ☒ 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			
			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, Ks. Signed Sandy Kipke Date 6-10-77 Authorized representative			
			19. Remarks: well will be pulled & plugged with well cuttings & gravel pack.			

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

Form WWC-5