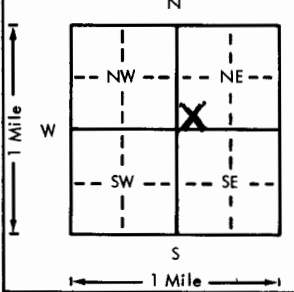
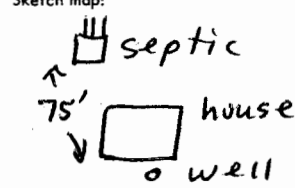


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Renov</u>	Fraction <u>SW 1/4 SW 1/4 NE 1/4</u>	Section number <u>2</u>	Township number <u>T 23 S</u>	Range number <u>R 5 E</u>
2. Distance and direction from nearest town or city: <u>3 mi E Hutchinson</u> Street address of well location if in city:				3. Owner of well: <u>Jerold D. Albright</u> R.R. or street: <u>RR #4</u> City, state, zip code: <u>Hutchinson Kan. 67501</u>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>12</u> in. Completion date <u>10-24-75</u> Well depth <u>63</u> ft.		
				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		
5. Type and color of material		From	To	8. Use: <input checked="" 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 type="checkbox"/> Oil field water <input type="checkbox"/> Other		
fine lt brown sand		0	7	9. Casing: Material <u>Plas</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <u>6 in</u> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft.		
sandy clay		7	9	Dia. <u>6</u> in. to <u>63</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. <u>320</u>		
fine sand		9	23	10. Screen: Manufacturer's name <u>JAL</u> Type <u>RMP</u> Dia. <u>6"</u> Slot/gauze <u>1/8 hole</u> Length <u>25'</u> Set between <u>38</u> ft. and <u>63</u> ft. ft. and <input type="checkbox"/> ft.		
sandy brown clay		23	34	Gravel pack? <u>yes</u> Size range of material <u>1/8 - 1/2</u>		
fine brown sand		34	63	11. Static water level: <input type="checkbox"/> mo./day/yr. <u>28</u> ft. below land surface Date <u>10-24-75</u>		
				12. Pumping level below land surfaces: <u>52</u> ft. after <u>2</u> hrs. pumping <u>10</u> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <u>15</u> g.p.m.		
				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <input type="checkbox"/>		
				14. Well head completion: <input checked="" 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 checked="" type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>13</u> ft.		
				16. Nearest source of possible contamination: ft. <u>75</u> Direction <u>NW</u> Type <u>septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>STA RITE</u> Model number <u>KP8C2</u> HP <u>1/2</u> Volts <u>230</u> Length of drop pipe <u>55</u> ft. capacity <u>15</u> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
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. <u>Price water well 193</u> Business name <u>RR #3 Hutchinson Kan.</u> License No. <u>1/4 1/4 1/4</u> Address <u>RR #3 Hutchinson Kan.</u> Signed <u>John Davenport</u> Date <u>6-10-76</u> Authorized representative		

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

Form WWC-5