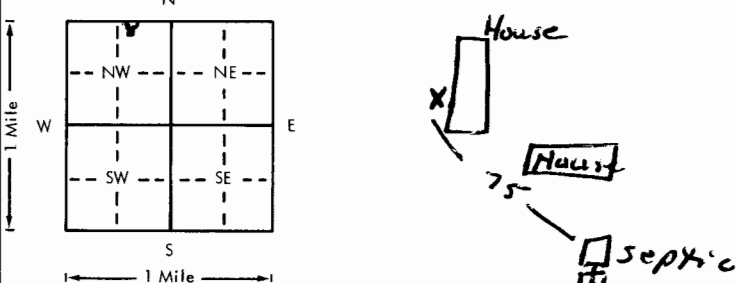


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Reno</b>	Fraction <b>NW 1/4 NE 1/4 NW 1/4</b>	Section number <b>27</b>	Township number <b>T 23 S R 6 E W</b>	Range number <b>6</b>
2. Distance and direction from nearest town or city: <b>1/4 Mi. W of</b>		3. Owner of well: <b>Merle Black</b> R.R. or street: <b>100 W 6th, lot 16</b> City, state, zip code: <b>Hutch, KS 67501</b>				
4. Locate with "X" in section below:		Sketch map:				
						
5. Type and color of material		From	To	6. Bore hole dia. <b>10</b> in. Completion date <b>7-30-79</b> Well depth <b>47</b> ft.		
<b>Brown Silt</b>		<b>0</b>	<b>6</b>	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		
<b>Brown Clay</b>		<b>6</b>	<b>20</b>	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		
<b>Gray Clay</b>		<b>20</b>	<b>25</b>	9. Casing: Material <b>PLST</b> Height: <b>above</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>3.58</b> lbs./ft. Dia. <b>6</b> in. to <b>47</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>128</b>		
<b>Fine Sand</b>		<b>25</b>	<b>35</b>	10. Screen: Manufacturer's name <b>Pump Co</b> Type <b>PVC</b> Dia. <b>6</b> Slot gauge <b>.03</b> Length <b>10</b> Set between <b>37</b> ft. and <b>47</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <b>Yes</b> Size range of material <b>F-1/2</b>		
<b>Gray Clay</b>		<b>35</b>	<b>37</b>	11. Static water level: <input type="checkbox"/> mo./day/yr. <b>24</b> ft. below land surface Date <b>7-30-79</b>		
<b>Sand &amp; Gravel</b>		<b>37</b>	<b>50</b>	12. Pumping level below land surfaces: <b>28</b> ft. after <b>2</b> hrs. pumping <b>20</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>40</b> g.p.m.		
				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
				14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade		
				15. Well grouted? <b>Yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>3</b> ft. to <b>13</b> ft.		
				16. Nearest source of possible contamination: ft. <b>75</b> Direction <b>SE</b> Type <b>Septic</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Aermeyer</b> Model number <b>SD19</b> HP <b>3/4</b> Volts <b>230</b> Length of drop pipe <b>38</b> ft. capacity <b>19</b> 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		
		(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. <b>Miller Water Well 382</b> Business name <b>Hutch, KS</b> License No. <b>382</b> Address <b>Exa Miller</b> Date <b>8-5-79</b> Signed <b>Authorized representative</b>		
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