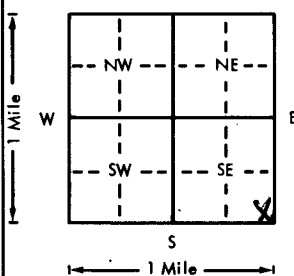


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Stafford</u>	Fraction <u>SE 1/4 SE 1/4 SE 1/4</u>	Section number <u>15</u>	Township number <u>T 24 S</u>	Range number <u>R 14 E/W</u>		
2. Distance and direction from nearest town or city: <u>15 2 E</u> Street address of well location if in city: <u>DILLWYN, KS</u>			3. Owner of well: <u>Jerry Long</u> R.R. or street: <u>R1</u> City, state, zip code: <u>ST. JOHN, KS</u>					
4. Locate with "X" in section below: <div style="text-align: center;">  </div> Sketch map:			6. Bore hole dia. <u>8</u> in. Completion date <u>7-6-76</u> Well depth <u>65</u> ft.					
5. Type and color of material			7. <input 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					
			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					
			9. Casing: Material <input type="checkbox"/> Height: <u>above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>      </u> lbs./ft. Dia. <u>5</u> in. to <u>65</u> ft. depth Wall Thickness: inches or Dia. <u>      </u> in. to <u>      </u> ft. depth gage No. <u>sch 40</u>					
			10. Screen: Manufacturer's name <u>MPI</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>1/8"</u> Length <u>15'</u> Set between <u>50</u> ft. and <u>65</u> ft. <u>      </u> ft. and <u>      </u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8-3/4"</u>					
(Use a second sheet if needed)			11. Static water level: <u>12</u> ft. below land surface Date <u>7-6-76</u> mo./day/yr.					
			12. Pumping level below land surfaces: <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>40</u> g.p.m.					
			13. Water sample submitted: <u>      </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u>      </u>					
			14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade					
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>12</u> ft.					
			16. Nearest source of possible contamination: <u>septic</u> ft. <u>N</u> Direction <u>70</u> Type <u>      </u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u>      </u> Model number <u>      </u> HP <u>      </u> Volts <u>      </u> Length of drop pipe <u>      </u> ft. capacity <u>      </u> g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> 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. <u>Kelly's Water Well Serv 186</u> Business name <u>R 2 Great Bend, KS</u> License No. <u>      </u> Address <u>      </u> Signed <u>Kelly Price</u> Date <u>7-15</u> Authorized representative					
			18. Elevation:		19. Remarks:			
			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

24 140 15 SE SE SE  
 T 24 S R 14 E  
 Sec 15