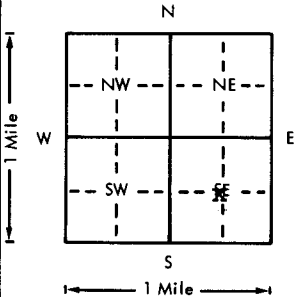


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>Edwards</b>	Fraction 1/4 <b>C</b> 1/4 SE 1/4	Section number <b>4</b>	Township number T <b>24</b> S R	Range number <b>16</b> <b>EW</b>
2. Distance and direction from nearest town or city: <b>2 1/2 miles north of Belpre</b>			3. Owner of well: <b>Don Neeland</b> R.R. or street: <b>Route 3</b> City, state, zip code: <b>Great Bend, KS 67530</b>		
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. <b>24</b> in. Completion date <b>10/31/77</b> Well depth <b>82</b> ft.		
5. Type and color of material			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		
			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"/> Low <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
From To			9. Casing: Material <b>steel</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>3.03</b> lbs./ft. Dia. <b>16</b> in. to <b>42</b> ft. depth; Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth; gage No. <b>7 ga.</b>		
			10. Screen: Manufacturer's name <b>W.A. Brown</b> Type <b>double-slot</b> Dia. <b>16"</b> Slot gauze <b>1/8</b> Length <b>40'</b> Set between <b>42</b> ft. and <b>82</b> ft. Gravel pack? <b>yes</b> Size range of material <b>3/8-200</b>		
top soil and clay			11. Static water level: <b>19</b> ft. below land surface Date <b>10/31/77</b> mo./day/yr.		
sand and gravel			12. Pumping level below land surfaces: <b>NC</b> ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.		
clay			13. Water sample submitted: ____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date ____		
sand and gravel with clay streaks and			14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade		
cemented gravel at 70'			15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.		
clay and limestone			16. Nearest source of possible contamination: <b>Field</b> ft. ____ Direction ____ Type <b>Field</b> Well disinfected upon completion? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
(Use a second sheet if needed)			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ 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. <b>Clarke Well &amp; Equip. Inc. 185</b> Business name <b>Great Bend, KS 67530</b> License No. ____ Address <b>Great Bend, KS 67530</b> Signed <b>[Signature]</b> Date <b>12/29/77</b> Authorized representative		
18. Elevation:  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:				

T  
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CSE  
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1/4  
1/4  
1/4

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

Form WWC-5