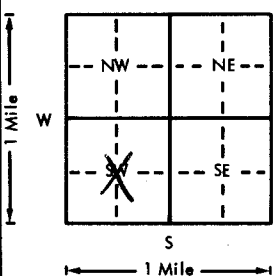


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 <b>C 1/4 S 1/4</b>	Section number <b>13</b>	Township number <b>T 24</b>	Range number <b>S R 17 E/W</b>
2. Distance and direction from nearest town or city: <b>3w/1 1/2 n/of Belpre, Ks.</b> Street address of well location-if in city:			3. Owner of well: <b>John Carson</b> R.R. or street: <b>Rt. 2</b> City, state, zip code: <b>Lewis, Ks.</b>		
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map: 		
5. Type and color of material			From	To	6. Bore hole dia. <u>20</u> in. Completion date <u>6-17-76</u> Well depth <u>140</u> ft.
<b>sandy top soil</b>			<b>0</b>	<b>2</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>clay</b>			<b>2</b>	<b>25</b>	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"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
<b>sand</b>			<b>25</b>	<b>27</b>	9. Casing: Material <u>steel</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>16</u> in. to <u>140</u> ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. <u>7 ga.</u>
<b>clay</b>			<b>27</b>	<b>32</b>	10. Screen: Manufacturer's name <u>Deerra</u> Type <u>steel</u> Dia. <u>16</u> Slot/gauze <u>3/16</u> Length <u>60</u> Set between <u>80</u> ft. and <u>140</u> ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4-3/8</u>
<b>Good gravel</b>			<b>32</b>	<b>43</b>	11. Static water level: _____ mo./day/yr. <u>25</u> ft. below land surface Date <u>2-6-76</u>
<b>clay</b>			<b>43</b>	<b>44</b>	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.
<b>Good gravel</b>			<b>44</b>	<b>62</b>	13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>2-6-76</u>
<b>clay</b>			<b>62</b>	<b>63</b>	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade
<b>Good sand and gravel</b>			<b>63</b>	<b>72</b>	15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.
<b>clay</b>			<b>72</b>	<b>73</b>	16. Nearest source of possible contamination: ft. <u>3/4</u> in. direction <u>N</u> Type <u>farm yard</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Extra good gravel</b>			<b>73</b>	<b>91</b>	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
<b>clay</b>			<b>91</b>	<b>91 1/2</b>	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>Rosencrantz-Bemis 134</b> Business name <b>Great Bend, Ks.</b> License No. _____ Address _____ Signed <u>Judith Redden</u> Date <u>9/11/76</u> Authorized representative
<b>Sand and gravel</b>			<b>91 1/2</b>	<b>96</b>	
<b>clay</b>			<b>96</b>	<b>125</b>	
<b>Good sand</b>			<b>125</b>	<b>142</b>	
<b>clay</b>			<b>142</b>	<b>151</b>	
<b>Slate</b> (Use a second sheet if needed)			<b>151</b>	<b>160</b>	
18. Remarks: <b>Fine clay</b>			<b>160-165</b>		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 24 R 17 E S 1/4 Sec 13

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

Form WWC-5