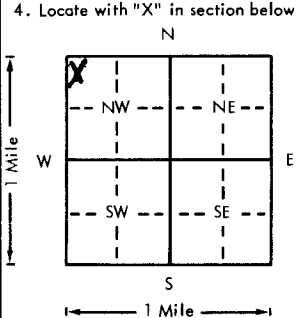


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

*French # 1-23*

1. Location of well: <i>Clowds</i>		Fraction: <i>3/4 NW/4 NW 1/4</i>	Section number: <i>23</i>	Township number: <i>T 24</i>	Range number: <i>R 17 E/W</i>
2. Distance and direction from nearest town or city: Street address of well location in city:		3. Owner of well: <i>Stirling Hamilton CO</i> R.R. or street: City, state, zip code: <i>Selling Jans</i>			
4. Locate with "X" in section below: 		Sketch map:		6. Bore hole dia. <i>5</i> in. Completion date <i>4-26-78</i> Well depth <i>60</i> ft.	
5. Type and color of material		From	To	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	
				8. Use: <input 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 checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other	
				9. Casing: Material <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Dia. <i>5</i> in. to <i>60</i> ft. depth Weight <i>287.8</i> lb./ft. Surface <i>17</i> in. Wall Thickness: inches or Dia. <i>5</i> in. to <i>60</i> ft. depth gage No. <i>200</i>	
				10. Screen: Manufacturer's name <i>Shirley</i> Type <i>Round</i> Dia. <i>5</i> Slot/gauge <i>1/8</i> Length <i>30</i> Set between <i>8</i> ft. and <i>60</i> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>5-44</i>	
				11. Static water level: <i>17</i> ft. below land surface Date <i>4-26-78</i> mo./day/yr.	
				12. Pumping level below land surfaces: <i>18</i> ft. after <i>1</i> hrs. pumping <i>100</i> g.p.m. ft. after <i>   </i> hrs. pumping <i>   </i> g.p.m. Estimated maximum yield <i>200</i> g.p.m.	
				13. Water sample submitted: <i>   </i> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <i>   </i>	
				14. Well head completion: <input type="checkbox"/> Pitless adapter <i>17</i> inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <i>0</i> ft. to <i>30</i> ft.	
				16. Nearest source of possible contamination: ft. <i>   </i> Direction <i>   </i> Type <i>   </i> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <i>   </i> Model number <i>   </i> HP <i>   </i> Volts <i>   </i> Length of drop pipe <i>   </i> ft. capacity <i>   </i> 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	
		(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. <i>Stirling Hamilton</i> Business name <i>   </i> License No. <i>   </i> Address <i>   </i> Signed <i>   </i> Date <i>   </i> Authorized representative		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 24  
 R 17  
 W E  
 23  
 NW/4 NW/4  
 1-23

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

Form WWC-5