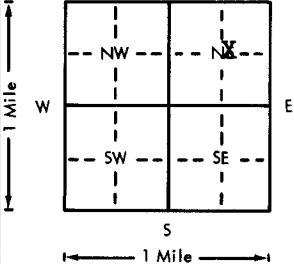


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Edwards	Fraction Center of 1/4 1/4 NE 1/4	Section number 22	Township number T 24 S R 18	Range number 18
2. Distance and direction from nearest town or city: 2 miles Northwest of Lewis, KS Street address of well location if in city:			3. Owner of well: Jim Pratt R.R. or street: Route 2 City, state, zip code: Lewis, KS 67552		
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		6. Bore hole dia. 24 in. Completion date 6-14-77 Well depth 78 ft.	
5. Type and color of material		From	To	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	
Top soil & clay clay		0	5	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	
Fine sand & thin clay streaks		5	17	9. Casing: Material <u>steel</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>30.3</u> lbs./ft. Dia. <u>16</u> in. to <u>40</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>7 ga.</u>	
Clay		17	24	10. Screen: Manufacturer's name <u>Doerr - D</u> <u>Cook - C</u> Type <u>Double-slot</u> Dia. <u>16"</u> Slot/gauze <u>1/8</u> Length <u>C-30' D-8'</u> Set between <u>C 40</u> ft. and <u>70</u> ft. <u>D 70</u> ft. and <u>78</u> ft. Gravel pack? <u>yes</u> Size range of material <u>3/8-200</u>	
Sand & gravel		24	71	11. Static water level: <u>30</u> ft. below land surface Date <u>5-19-77</u> mo./day/yr.	
Clay		71	78	12. Pumping level below land surfaces: <u>N/C</u> <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> </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? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
				16. Nearest source of possible contamination: <u>FIELD</u> ft. <u> </u> Direction <u> </u> Type <u> </u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Peerless Pump</u> Model number <u>12LB-3</u> HP <u>80</u> Volts <u> </u> Length of drop pipe <u>70</u> ft. capacity <u>900</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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. <input checked="" type="checkbox"/> Clarke Well & Eq., Inc. 185 Business name <u>Great Bend, KS</u> license No. <u>67530</u> Address <u> </u> Signed <u>D.W. Clark</u> Date <u>6-16-77</u> Authorized representative	
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: (Use a second sheet if needed)				

24 180 22
1/4 1/4 1/4
CME

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

Form WWC-5