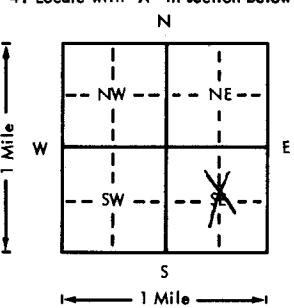


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>Edwards</u>		Fraction <u>1/4 1/4 1/4</u> Section number <u>36</u>			Township number <u>24 S R</u> Range number <u>18 E A</u>	
2. Distance and direction from nearest town or city: <u>1 3/4 E 1/4 N of Lewis</u> Street address of well location if in city:				3. Owner of well: <u>Grover J. McBean</u> R.R. or street: City, state, zip code: <u>Lewis, Ks.</u>		
4. Locate with "X" in section below: Sketch map: 				6. Bore hole dia. <u>29</u> in. Completion date <u>8-27-76</u> Well depth <u>76</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 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		
From To				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 <input type="checkbox"/> lbs./ft. Dia. <u>16</u> in. to <u>76</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>7</u>		
				10. Screen: Manufacturer's name <u>Doerrs</u> Type <u>steel</u> Dia. <u>16</u> <u>slat gauge</u> <u>3/16</u> Length <u>26</u> Set between <u>50</u> ft. and <u>76</u> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/2 3/4 3/8</u>		
Top Soil				11. Static water level: <u>25</u> ft. below land surface Date <u>7-22-76</u> mo./day/yr.		
Clay				12. Pumping level below land surfaces: <u>29</u> ft. after <u>1</u> hrs. pumping <u>900</u> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <u>1000</u> g.p.m.		
Fine Sand				13. Water sample submitted: <u>Yes</u> <input type="checkbox"/> No Date <u>7-28-76</u> mo./day/yr.		
Clay				14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
Sand & Gravel				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.		
Clay				16. Nearest source of possible contamination: ft. <u>5/4</u> Direction <u>NW</u> Type <u>Correl</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Gravel				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>WCR</u> Model number <u>4BHC-12</u> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <u>65</u> ft. capacity <u>80</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		
Clay				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>Rosenkrantz-Bemis</u> <u>134</u> Business name License No. Address <u>Great Bend, Ks.</u> Signed <u>Fredia Nadeau</u> Date <u>9/30/76</u> Authorized representative		
18. Elevation:		19. Remarks:		(Use o second sheet if needed)		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 24 R 18 E S 36 Sec 1/4 1/4 1/4 CSE

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

Form WWC-5