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

WATER WELL RECORD
KSA 82a-1201-1215

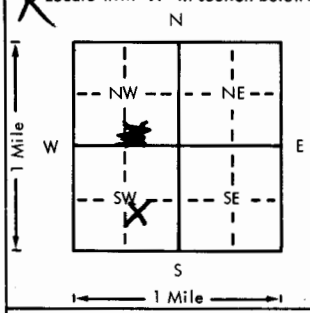
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Stafford	X NW 1/4 SE 1/4 SW 1/4	4	T 25 S	R 12 E/W

2. Distance and direction from nearest town or city: Stafford Ks 3 south 3 west 3/4 South
Street address of well location if in city:

3. Owner of well: Emphesis Drlg.
R.R. or street:
City, state, zip code: Russell Kans

X Locate with "X" in section below:



Sketch map:

6. Bore hole dia. 9 in. Completion date 6-8-78
Well depth 70 ft.

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn X Oil field water __ Other

9. Casing: Material PVC Height: Above or below
Threaded ___ Welded X Surface 12 in.
RMP ___ PVC ___ Weight 287.3 lbs./ft.
Dia. 5 in. to 70 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. 200

5. Type and color of material	From	To
Clay	0	18
Fine Sand	18	38
Gravel	38	70

(Use a second sheet if needed)

10. Screen: Manufacturer's name Shop Made
Type SAW Dia. 5
Slot/gauze 18 Length 20
Set between 50 ft. and 70 ft.
___ ft. and ___ ft.
Gravel pack? X Size range of material 1/4-1/8

11. Static water level: mo./day/yr.
25 ft. below land surface Date 6-8-78

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.

13. Water sample submitted: mo./day/yr.
__ Yes X No Date

14. Well head completion:
__ Pitless adapter 12 Inches above grade

15. Well grouted? yes
With: __ Neat cement X Bentonite __ Concrete
Depth: From 10 ft. to 0 ft.

16. Nearest source of possible contamination:
ft. ___ Direction ___ Type ___
Well disinfected upon completion? ___ Yes ___ No

17. Pump: __ Not installed
Manufacturer's name
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.p.m.
Type:
__ Submersible __ Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

18. Elevation:

Topography:
__ Hill
X Slope
__ Upland
__ Valley

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.
Myers Water Well 143
Business name License No.
Address Gt Bend Ks
Signed Floyd Rosendell Date 6-8-78
Authorized representative

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

Form WWC-5

T 25 R 12 E/W Sec 4 1/4 NE SW