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

							eka, Kansas 66620		
	County Fraction /		1	Section number		Township number	Range number		
1. Location of well:	STAFFORD	NW14 NW 1/450	1/4 22		2	1 255 s	R 15W EM		
2. Distance and dire	3. Owner of well: Adecederation of Cutting CV - R.R. or street: South On Cutting CV - City, state, zip code: Plant 29. At 19.								
4. Locate with "X"	in section below:	Sketch map:	5,7	,,,	7	6. Bore hole dia.	. Completion date		
, <u> </u>	1				′	Well depth Oft.	*		
NW	NE					7 Cable toolRotary Hollow rod Jetted 8. Use: Domestic F	Bored Reverse rotary		
w X	E E					Irrigation A Lawn 2	Nir conditioning Stock Dil field water Other		
	<u> </u>					9. Casing: Material PLC Height: Above or below Threaded Welded Surface in. RMP PVC Weight lbs./ft.			
<u>1 → 1 N</u>				T = T		Dia 2 in. to 22 ft. de Dia in. to ft. de	pth Wall Thickness: inches or		
5. Type and color of	material			From	То	10. Screen Manufacturer's			
						Type	Dia.		
						Slot/gauze	Length		
				1 1		Set betweenft.	_ft. andft.		
				+-1			ma./day/yr.		
	W WW.					11. Static water level:	/ / / in the		
					•	12. Pumping level below lar	A .		
						ft. after	hrs. pumping g.p.m.		
						Estimated maximum yield — 13. Water sample submitted:			
				+ -1		Yes No	Date		
				-		14. Well head completion: Pitless adapter	Inches above grade		
						15. Well grouted?	A miches disove group		
						With: Neat cement Depth: From ft. to	Bentonite Concrete		
•						16. Nearest source of possib	I IU		
- 300						ft Disection Well disinfected upon comp	Туре		
		****		+-	-	17. Pump:	Not installed		
				ļ		Manufacturer's name Model number	Volts (
						Length of drop pipe	ft. capacityg.p.m.		
						Type: Submersible	Turbine		
	(Use a second	sheet if needed)				Jet Centrifugal	Reciprocating Other		
18. Elevation:	19. Remarks:	es lake We us	ul	soh	w		my jurisdiction and this report		
Topography:	they are the	w,				Business name	License No.		
Slope Upland	\					Signed Dudy	6 6-20-76		
Valley						Authorized re	presentative >		

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	Ta	T				T- 1	1
. Location of well	l: County	Fraction	(.)	Section num		Township number	Range number
	Myord	1/VU1/4/VU1/4SC	1/4	6	2		S R /5W EM
. Distance and di	rection from market town or city:	le in a	3. Owr	er of well: (yeu	the Oil Con	the
	ell location if in city:		City, s	tate, zip cod	ja:	heat Band . To	
Locate with "X"	" in section below:	Sketch map:			7	6. Bore hole dia.	
	N					Well depth LOOft.	6-10-76
	!					7 Cable toolKota	
NW	NE						d Bored Reverse ratary
w	E						Public supply industry
" X							Air conditioning Stock Oil field water Other
SW	SE				1		Height: Above or below
						Threaded Welded	Surfacein.
A.	\$						Weight bs./ft.
XType and color	of material			From	To		epth Wall Thickness: inches or epth gage No. 459
type and color	or material			From	,,	10. Screen: Manufacturer	
	Reading	0			<i>,</i> 0		
	2000	Cong	 	1		TypeSlot/gauze	
	Clari			10 2	20	Set between	ft. andft.
	light of	. 0		20 3	30		. andft.
N-112-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	2000	in in			30	Gravel pack? Size	
•	. Land			30 5	10	11. Static water level: ft. below land	ma./day/yr. surface Date
	Ca and			40 6	50	12. Pumping level below I	
· · · · · · · · · · · · · · · · · · ·	- Jacob			 / 	., .,		hrs. pumpingg.p.m.
	·					Estimated maximum yield -	hrs. pumpingg.p.m.
						13. Water sample submitte	
				 -		Yes No	′ ′
				1		14. Well head completion:	1
						Pitiess adapter	
						15. Well grouted?	Bentonite Concrete
						Depth: From ft.	
						16. Nearest source of pass	ible contamination:
						ft Direction .	
				-		Well disinfected upon com	pletion? Yes No
						Manufacturer's name	1.4c Heldings
						Model number	HP Volts
		···		+		Length of drop pipe Type:	ft. capacityg.p.m.
						Submersible	Turbine
	4.					Jet	Reciprocating
10 et	T	I sheet if needed)				Centrifugal	Other
18. Elevation:	19. Remarks:			, t (200	20. Water well contractor This well was drilled unde	's certification: r my jurisdiction and this report
_		e mit i i i i i i i i i i i i i i i i i i				is true to the best of my ki	
Topography:						0	· · · · · · · · · · · · · · · · · · ·
Hill Slope						Business name Address	License No.
Upland						Signed —	Date
Vailey						Authorized	representative