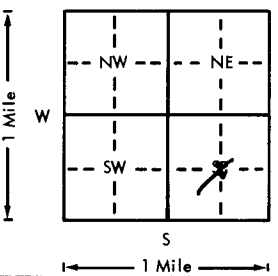


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

NO

1. Location of well:	County Edwards	Fraction 1/4 C 1/4 SE 1/4	Section number 9	Township number T 25 S	Range number R 16 E/W
2. Distance and direction from nearest town or city: 35-3/4 EAST OF		3. Owner of well: Dean Newsom			
Street address of well location if in city: Bellevue		R.R. or street: City, state, zip code: Lewis, Ks.			
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		6. Bore hole dig. 29 in. Completion date 12-27-76 Well depth 117 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	
Sandy Top Soil		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	
Clay		5	30	9. Casing: Material steel Height: Above 0 below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 18 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 16 in. to 117 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gage No. 7	
Fine Sand and Clay		30	43	10. Screen: Manufacturer's name Doers Type steel Dia. 16 Slot/gauze 3/16 Length 64 Set between 53 ft. and 117 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/2 3/4 3/8	
Sand		43	47	11. Static water level: <input type="checkbox"/> mo./day/yr. 24 ft. below land surface Date 11-23-76	
Clay		47	52	12. Pumping level below land surfaces: 48 mnc ft. after 1 hrs. pumping 800 g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 1000 g.p.m.	
Sand and Gravel		52	58	13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
Clay		58	61	14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> inches above grade	
Sand		61	67	15. Well grouted? no yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft. mnc	
Clay		67	91	16. Nearest source of possible contamination: ft. 390 Direction NW Type oil well Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Good Sand and Gravel		91	111	17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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	
Rock		111	112	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. Rosencrantz-Bemis 134	
Good Gravel		112	116	Business name Great Bend, Ks. License No. _____ Address _____ Signed Fredia Dodson Date 3/9/77 Authorized representative	
Clay and Rock		116	135		
(Use a second sheet if needed)					
18. Elevation:	19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

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

Form WWC-5