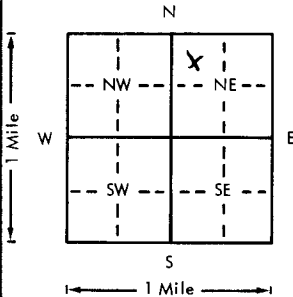


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <b>EDWARDS</b>	Fraction <b>C 1/4 NW 1/4 NE 1/4</b>	Section number <b>29</b>	Township number <b>T 25<sup>s</sup></b>	Range number <b>R 16<sup>w</sup></b>	E/W
2. Distance and direction from nearest town or city: <b>Belpre</b> Street address of well location if in city: <b>6 1/2 SOUTH</b> <b>1/2 EAST Southside</b>				3. Owner of well: <b>D. R. LAUCK C/O</b> R.R. or street: City, state, zip code: <b>126 Washington St Bend Mo</b>			
4. Locate with "X" in section below: Sketch map: 				6. Bore hole dia. <b>4</b> in. Completion date _____ Well depth <b>60</b> ft. <b>7-26-78</b>			
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 type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other			
From				9. Casing: Material _____ Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <b>278-3</b> lbs./ft. Dia <b>5</b> in. to <b>60</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No <b>300</b>			
				10. Screen: Manufacturer's name <b>Keisler</b> <b>Shop made</b> Type <b>Saw</b> Dia. <b>5</b> Slot/gauze <b>1/2</b> Length <b>20</b> Set between <b>40</b> ft. and <b>60</b> ft. _____ ft. and _____ ft. Gravel pack? <b>yes</b> Size range of material <b>14-18</b>			
				11. Static water level: _____ mo./day/yr. <b>16</b> ft. below land surface Date <b>7-26-78</b>			
				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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____			
				14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade			
				15. Well grouted? <b>yes</b> With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete Depth: From <b>40</b> ft. to <b>20</b> ft.			
				16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No			
				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			
				(Use a second sheet if needed)			
18. Elevation:		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. <b>Mears Water Well</b> <b>143</b> Business name License No. Address <b>GT Bend 15</b> Signature <b>Lloyd Randall</b> Date <b>7-26-78</b> Authorized representative			
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input 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