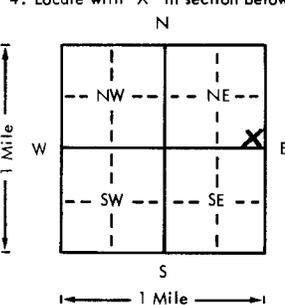


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>N 1/4 SE 1/4 SE 1/4 NE 8</u> Section number <u>8</u> Township number <u>T 25 S</u> Range number <u>R 17 W</u> E/W	
2. Distance and direction from nearest town or city: <u>Falsburg Rd and Hwy 50 3/4 SOUTH - WEST side</u> Street address of well/location if in city: <u>side</u>	
3. Owner of well: <u>Steeling Delg.</u> R.R. or street: City, state, zip code: <u>Steeling KS</u>	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
	From To
<u>Five Sand</u>	<u>0</u> <u>20</u>
<u>Clay</u>	<u>20</u> <u>40</u>
<u>Gravel</u>	<u>40</u> <u>60</u>
6. Bore hole dia. <u>9</u> in. Completion date <u>9-7-78</u> Well depth <u>60</u> ft.	
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	
9. Casing: Material _____ Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>278-3</u> lbs./ft. Dia. <u>5</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>200</u>	
10. Screen: Manufacturer's name <u>Peerless Mfg</u> Type <u>Saw</u> Dia. <u>5</u> Slot/gauze <u>1/4</u> Length <u>20</u> Set between <u>60</u> ft. and <u>40</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>1/4-1/2</u>	
11. Static water level: _____ mo./day/yr. <u>20</u> ft. below land surface Date <u>9-7-78</u>	
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 <u>12</u> Inches above grade	
15. Well grouted? <u>yes</u> With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete Depth: From <u>0</u> ft. to <u>10</u> 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: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> 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. <u>Myer Water Well 143</u> Business name _____ License No. _____ Address <u>Great Bend KS</u> Signed <u>Clayton Roseadell</u> Date <u>9-7</u> Authorized representative	

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

Form WWC-5