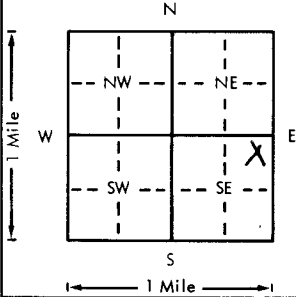


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>NE 1/4 NE 1/4 SE 1/4</b> Section number <b>28</b> Township number <b>T 25 S R 17</b> Range number <b>E/W</b>	
2. Distance and direction from nearest town or city: <b>Belpre 7 SOUTH 5 west</b> Street address of well location if in city: <b>3/4 NORTH WESTSIDE</b> 3. Owner of well: <b>X phor Shilling CO</b> R.R. or street: <b>PRATT KS</b> City, state, zip code: <b>PRATT KS</b>	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
	From To
<b>Clay</b>	<b>0 18</b>
<b>Fine Sand</b>	<b>18 40</b>
<b>Gravel</b>	<b>40 60</b>
(Use a second sheet if needed)	
18. Elevation:	19. Remarks:
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	
6. Bore hole dia. <b>9</b> in. Completion date <b>7-15-78</b> Well depth <b>60</b> ft.	
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	
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 <input type="checkbox"/> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> 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. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gage No. <b>200</b>	
10. Screen: Manufacturer's name <b>Teerlead</b> <b>Shop made</b> Type <b>Saw</b> Dia. <b>5</b> Slot/gauze <b>1/8</b> Length <b>20</b> Set between <b>40</b> ft. and <b>60</b> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8-1/4</b>	
11. Static water level: <input type="checkbox"/> mo./day/yr. <b>10</b> ft. below land surface Date <b>7-15-78</b>	
12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.	
13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> Inches above grade	
15. Well grouted? <b>yes</b> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>60</b> ft.	
16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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	
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>Myers WATER Well 183</b> Business name License No. Address <b>GT Bend</b> Signed <b>Floyd Rasendahl</b> Date <b>7-15-78</b> Authorized representative	

T 25 S R 17 E Sec 28 NE 1/4 SE 1/4

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

Form WWC-5