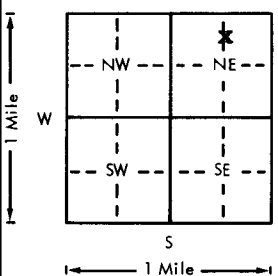


USE TYPEWRITER OR BALL POINT PEN. PRESS FIRMLY, PRINT CLEARLY.

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 Edwards	Fraction 1/4 N 1/2 NE 1/4	Section number 20	Township number T 25 S R	Range number 18 E W
2. Distance and direction from nearest town or city: 7 1/2 miles Southeast of Kinsley, KS Street address of well location if in city:			3. Owner of well: Donald E. Fletcher R.R. or street: Route 2 City, state, zip code: Kinsley, KS 67547		
4. Locate with "X" in section below: N  W E S 1 Mile			Sketch map:		
5. Type and color of material			From	To	6. Bore hole dia. <u>24</u> in. Completion date <u>2-17-77</u> Well depth <u>116</u> ft.
<u>top soil & sandy clay & fine sand</u>			<u>0</u>	<u>21</u>	7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary
<u>sand & gravel with thin clay streaks</u>			<u>20</u>	<u>60</u>	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
<u>clay & sandstone streaks</u>			<u>60</u>	<u>62</u>	9. Casing: Material <u>steel</u> Height <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>30.3</u> lbs./ft. Dia. <u>16</u> in. to <u>50</u> ft. depth; Wall Thickness: inches or Dia. <u>16</u> in. to <u>100</u> ft. depth; gage No. <u>7ga.</u>
<u>sand & gravel with thin clay streaks</u>			<u>62</u>	<u>82</u>	10. Screen: Manufacturer's name <u>Brown</u> Type <u>Double-slot</u> Dia. <u>16"</u> Slot gauze <u>1/8</u> Length <u>46'</u> Set between <u>50</u> ft. and <u>80</u> ft. <u>100</u> ft. and <u>116</u> ft. Gravel pack? <u>yes</u> Size range of material <u>3/8-200</u>
<u>clay & limestone streak & gravel streak at 85'</u>			<u>82</u>	<u>100</u>	11. Static water level: _____ mo./day/yr. <u>30'</u> ft. below land surface Date <u>1-27-77</u>
<u>sand & gravel</u>			<u>100</u>	<u>115</u>	12. Pumping level below land surfaces: <u>N/C</u> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.
<u>gray clay</u>			<u>115</u>	<u>116</u>	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____
					14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade
					15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> 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 checked="" type="checkbox"/> No
					17. Pump: _____ Not installed Manufacturer's name <u>Peerless Pump</u> Model number <u>12MB-2</u> HP <u>25</u> Volts <u>460</u> Length of drop pipe <u>70</u> ft. capacity <u>900</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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 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. Clarke Well & Equipm, Inc. 185 Business name License No. Address <u>Great Bend, KS 67530</u> Signed <u>D.W. Clark</u> Date <u>2-23-77</u> Authorized representative		

25
18
20
1/4
1/4
1/4
NE

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

Form WWC-5