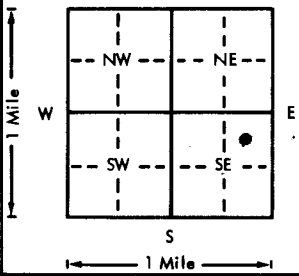


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 C 1/4 NE 1/4 SE 1/4 Section number 24 Township number T 25 S 18 Range number 18 E/W	
2. Distance and direction from nearest town or city: 5 South / east of Lewis Street address of well location if in city: of Lewis 3. Owner of well: Stirling Drilling Co R.R. or street: Stirling Kansas City, state, zip code: Stirling Kansas	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
	From To
Clay	0 20
Sand	20 60
Gravel	60 85
(Use a second sheet if needed)	
6. Bore hole dia. 5 in. Completion date 9-25-75 Well depth 85 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"/> Stack <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other	9. Casing: Material PVC Height: (Above) or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 223 lbs./ft. Dia. 5 in. to 85 ft. depth Wall Thickness 1/8 in. Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 200
10. Screen: Manufacturer's name Peerless Plastic Type PVC Dia. 3 Slow gauze <input checked="" type="checkbox"/> Length 20 Set between 65 ft. and 85 ft. Grovel pack? <input checked="" type="checkbox"/> Size range of material 1/2 - 1/4	11. Static water level: 27 ft. below land surface Date 9-25-75 mo./day/yr.
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"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/> mo./day/yr.
14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade	15. Well grouted? <input checked="" type="checkbox"/> Yes With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.
16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input 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
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. Myers Water Well 143 Business name License No. Address Stirling, Kan Signature [Signature] Date 9-25-75 Authorized representative	

T 25 S 18 R 18 E/W
 Sec 24 CNE 1/4
 1/4 1/4 1/4

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

Form WWC-5