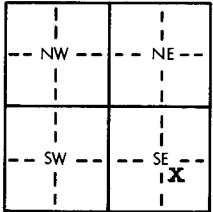


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 NW 1/4 SE 1/4 SE 1/4	Section number 30	Township number T 25 S R 18 E/W	Range number
2. Distance and direction from nearest town or city: 7-S 3-E 1 1/4-N of Kinsley, Ks. Street address of well location if in city:			3. Owner of well: B & N Drilling Co. R.R. or street: Box 846 City, state, zip code: Independence, Kansas 67301			
4. Locate with "X" in section below: <div style="text-align: center;">N 1 Mile W E S 1 Mile</div> 			Sketch map: 6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>100</u> ft. <u>6-15-78</u>			
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			
			9. Casing: Material <u>pvc</u> Height: Above or below _____ Threaded _____ Welded _____ Surface <u>18</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>4 1/2</u> in. to <u>100</u> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. <u>.237</u>			
			10. Screen: Manufacturer's name _____ <u>CertainTeed</u> Type <u>pvc</u> Dia. <u>4 1/2</u> Slot <u>xxx 1/16</u> Length <u>40</u> Set between <u>60</u> ft. and <u>100</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4 3/8</u>			
			11. Static water level: _____ mo./day/yr. <u>19</u> ft. below land surface Date <u>6-15-78</u>			
			12. Pumping level below land surfaces: <u>19</u> ft. after <u>2</u> hrs. pumping <u>70</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>200</u> g.p.m.			
			13. Water sample submitted: _____ mo./day/yr. ____ Yes <input checked="" type="checkbox"/> No Date _____			
			14. Well head completion: ____ Pitless adapter _____ Inches above grade			
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From <u>0</u> ft. to <u>10</u> ft.			
			16. Nearest source of possible contamination: ft. <u>180</u> Direction <u>SE</u> Type <u>oilwell</u> Well disinfected upon completion? <u>HTH</u> Yes _____ 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: ____ Submersible _____ Turbine ____ Jet _____ Reciprocating ____ Centrifugal _____ Other _____			
			(Use a second sheet if needed)			
18. Elevation:		19. Remarks:				
Topography: ____ Hill ____ Slope <input checked="" type="checkbox"/> Upland ____ Valley						
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. Rosencrantz-Bemis <u>134</u> Business name License No. Address <u>Great Bend, Kansas 67530</u> Signed <u>Sandy Hilgert</u> Date <u>6-23-78</u> Authorized representative						

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

Form WWC-5