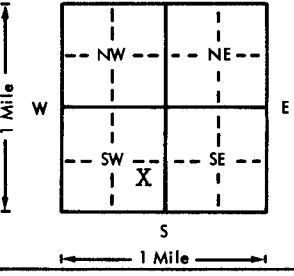


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 SE 1/4 SW 1/4</b>	Section number <b>5</b>	Township number <b>T 25</b>	Range number <b>S 20 R 3E</b>
2. Distance and direction from nearest town or city: <b>(Offerle, Kansas)</b> Street address of well location if in city: <b>1/2 N-1 E- Offerle</b>			3. Owner of well: <b>Ronald J. Herrmann</b> R.R. or street: <b>P.O. Box 13430</b> City, state, zip code: <b>San Antonio, Texas</b>			
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia: <b>7 1/8</b> in. Completion date _____ Well depth <b>88</b> ft. <b>4-07-65</b>			
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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other			
From			9. Casing: Material <u>PVC</u> Height: Above 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>291</u> lbs./ft. Dia. <u>5</u> in. to <u>88</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>265</u>			
			10. Screen: Manufacturer's name <u>Jess &amp; Lowell</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>1/8"</u> Length <u>30'</u> Set between <u>58</u> ft. and <u>88</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>3/16"</u>			
Top Soil			11. Static water level: _____ mo./day/yr. <u>50</u> ft. below land surface Date <u>3/29/76</u>			
Tan Clay			12. Pumping level below land surfaces: <u>NA</u> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.			
Tan sandy clay			13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____			
			14. Well head completion: <input type="checkbox"/> Pitless adapter _____ 18 Inches above grade			
			15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.			
			16. Nearest source of possible contamination: <u>none</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
			17. Pump: _____ Not installed Manufacturer's name <u>Aermotor Tower &amp; Mill</u> Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity <u>2</u> 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 checked="" type="checkbox"/> Other			
			(Use a second sheet if needed)			
18. Elevation:		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>Friesen Windmill</u> <u>252</u> Business name License No. Address <u>Meade, Kansas</u> <u>67864</u> Signed <u>[Signature]</u> Date <u>5-3-76</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

100

25 20 W  
 Sec 5  
 NE SE SW  
 1/4 1/4 1/4

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

Form WWC-5