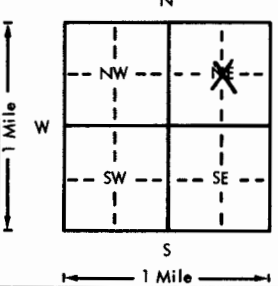


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Pratt	Fraction 1/4 1/4 CNE 1/4	Section number 8	Township number T 26 S R 15 E	Range number 26 15 26
2. Distance and direction from nearest town or city: 3/4 E, Hopewell, KS			3. Owner of well: Glen Curtis R.R. or street: Hopewell, KS City, state, zip code:			
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. 3.0 in. Completion date 8-25-76 Well depth 123 ft.			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
5. Type and color of material			From	To	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	
					9. Casing: Material IRON Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 24 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 4.6 in. to 83 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 3/16	
					10. Screen: Manufacturer's name Doerr Type IRON Dia. 16" Slot/gauze 1/8" Length 40' Set between 83 ft. and 123 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/8"-3/4"	
					11. Static water level: <input type="checkbox"/> mo./day/yr. 24 ft. below land surface Date 8-25-76	
					12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. 52 ft. after 4 hrs. pumping 1400 g.p.m. Estimated maximum yield 1200 g.p.m.	
					13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
					14. Well head completion: <input type="checkbox"/> Pitless adapter 24 inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 12 ft.	
					16. Nearest source of possible contamination: NONE ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" 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	
			(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. Kelly's Water Well Ser 186 Business name R.2 Great Bend, KS License No. <input type="checkbox"/> Address Kelly Price Date 9-20 Signed Kelly Price Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 26 S R 15 E
 Sec 8
 1/4 1/4 CNE 1/4

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

Form WWC-5