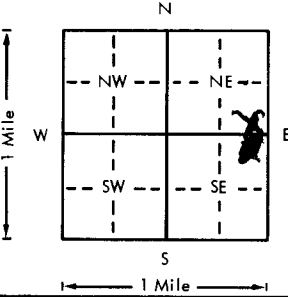


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

Mac Tin #1

<input checked="" type="checkbox"/> Location of well:	County EDWARDS	<input checked="" type="checkbox"/> Section	Section number 8	Township number T 26	Range number R 16															
Distance and direction from nearest town or city: Transvale 990 South 23rd West Street address of well location if in city: 990-330 West			3. Owner of well: Stearling Helg R.R. or street: Box 129 City, state, zip code: Stearling, Ks. 67579																	
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. 9 in. Completion date _____ Well depth 60 ft. 2-8-79																	
5. Type and color of material <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;"></th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td>Silt</td> <td>0</td> <td>5</td> </tr> <tr> <td>Sandy Clay</td> <td>5</td> <td>20</td> </tr> <tr> <td>Fine Sand</td> <td>20</td> <td>40</td> </tr> <tr> <td>Gravel</td> <td>40</td> <td>60</td> </tr> </tbody> </table>				From	To	Silt	0	5	Sandy Clay	5	20	Fine Sand	20	40	Gravel	40	60	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		
	From	To																		
Silt	0	5																		
Sandy Clay	5	20																		
Fine Sand	20	40																		
Gravel	40	60																		
			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 _____ Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight 271.3 lbs./ft. Dia. 5 in. to 60 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 265																	
			10. Screen: Manufacturer's name _____ Peerless Type Saw Dia. 5 Slot/gauze 7/8 Length 20 Set between 60 ft. and 40 ft. _____ ft. and _____ ft. Gravel pack yes Size range of material 14-18																	
			11. Static water level: _____ mo./day/yr. 25 ft. below land surface Date 2-8-79																	
			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.																	
			13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____																	
			14. Well head completion: <input type="checkbox"/> Pitless adapter 12 inches above grade																	
			15. Well grouted? 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. _____ Direction _____ Type None Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <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: 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 Great Bend Ks 67530 Signed Lloyd Rosenthal Date 2-8-79 Authorized representative																

T 26 R 16 E 8 SE 1/4 NE 1/4

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

Form WWC-5