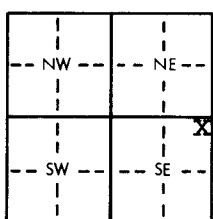


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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: <div style="text-align: center; font-size: 1.2em;">Edwards</div>		County <div style="text-align: center; font-size: 1.2em;">ne 1/4 ne 1/4 se 1/4</div>		Section number <div style="text-align: center; font-size: 1.2em;">23</div>		Township number <div style="text-align: center; font-size: 1.2em;">T 26 S R 16w</div>		Range number <div style="text-align: center; font-size: 1.2em;">E/W</div>	
2. Distance and direction from nearest town or city: <div style="text-align: center; font-size: 1.2em;">3s 3e</div>				3. Owner of well: Gabbert-Jones, Inc. R.R. or street: 830 Sutton Pl. City, state, zip code: Wichita, Ks. 67202					
Street address of well location if in city: <div style="text-align: center; font-size: 1.2em;">Trousdale, Ks.</div>									
4. Locate with "X" in section below: <div style="text-align: center; font-size: 0.8em;">N 1 Mile W E S 1 Mile</div> 				Sketch map:					
5. Type and color of material				From		To		6. Bore hole dia. <u>8</u> in. Completion date <u>2-10-78</u> Well depth <u>77</u> 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"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other	
								9. Casing: Material <input type="checkbox"/> Height: Above ground <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>2.8</u> lbs./ft. Dia. <u>5</u> in. to <u>77</u> ft. depth Wall Thickness: inches <u>sch 40</u> Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u> </u>	
								10. Screen: Manufacturer's name <u>Jetstream</u> Type <u>pvc</u> Dia. <u>5"</u> Slot/gauze <u>1/32"</u> Length <u>20'</u> Set between <u>57</u> ft. and <u>77</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8-3/4"</u>	
								11. Static water level: <u>21</u> ft. below land surface Date <u>2-10-78</u> mo./day/yr.	
								12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <u>100</u> g.p.m.	
								13. Water sample submitted: ____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date ____	
								14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade	
								15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
								16. Nearest source of possible contamination: <u>oil</u> ft. <u>60'</u> Direction <u>sw</u> Type <u>test</u> Well disinfected upon completion? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
								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:		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. Kellys Waterwell Ser 186 Business name License No. <u>R2 Great Bend, Ks.</u> Address <u>Kelly Price</u> Signed <u>Kelly Price</u> Date <u>8-30-</u> Authorized representative					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley									

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

Form WWC-5