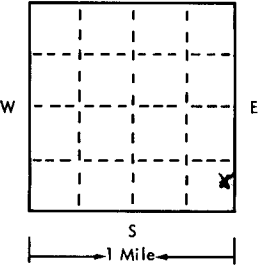


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County Edwards	Township name S. BROWN	Fraction SE 1/4 SE 1/4	Section number 25	Town number T-26-S	Range number R-18W	
Distance and direction from nearest town or city: Street address of well location if in city: 11 North 3 E. of Greensburg				3 Owner of well: Keith Chadd Address: Mullinville Ks			
Locate with "X" in section below: N  S 1 Mile			Sketch map:			4 Well depth: 60 ft. Date of completion 4-28-75 Well diameter 8 3/4	
2 Type and color of material			From	To	5 <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		
			Top Soil & Hard pan	0	6	6 Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>	
			Sand	6	14	7 Casing: Material PMP Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 14 in. Diam. 5 in. to 60 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Weight 200 lbs./ft.	
			Clay	14	17	8 Screen: Jess & Lowell Manufacturer Type Slot Dia. 5" Slot/gauze Length 20 FT Set between 40 ft. and 60 ft. Fittings: Gravel pack <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material	
			Gravel (Fine to 3/4")	17	29	9 Static water level: 26 ft. below land surface Date 4-29-75	
			Clay	29	32	10 Pumping level below land surfaces: 26 ft. after 2 hrs. pumping 4 g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 25 g.p.m.	
			Gravel 1/8 To 3/4	32	60	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date	
(use a second sheet if needed)					12 Well head completion: <input type="checkbox"/> Pitless adapter 14 inches above grade		
					13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From 0 ft. to 10 ft.		
					14 Nearest source of possible contamination: ft. PASTURE WELL type Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
					15 Pump: <input type="checkbox"/> Not installed Manufacturer's name Windmill Model number _____ HP _____ Volts _____ Length of drop pipe 37 ft. capacity _____ g.m.p. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input checked="" type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
					17 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. Carl Haysel Water Well Serv. 224 Business name License No. Address 603 S. Maple Signed Carl Haysel Date 5-11-75 Authorized representative		
16 Remarks: elevation Level Pasture Land 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 Kansas State Dept. Of Health.

Form WWC-5