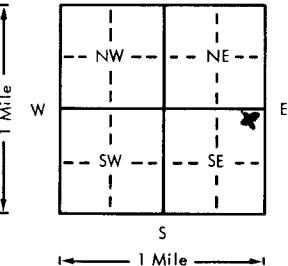


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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: <u>Edwards</u>	Fraction: <u>NE 1/4 NE 1/4 SE 1/4</u>	Section number: <u>28</u>	Township number: <u>T 26 S</u>	Range number: <u>R 18 W</u>
2. Distance and direction from nearest town or city:		3. Owner of well: <u>Lester Dealy</u>				
Street address of well location if in city: <u>11 North Greensburg Kans</u>		R.R. or street: <u>Lewis Kansas</u>				
City, state, zip code:						
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>8 3/4</u> in. Completion date: <u>10-7-77</u>		
				Well depth: <u>50</u> ft.		
5. Type and color of material		From	To	7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug		
<u>Top Soil</u>		<u>0</u>	<u>2</u>	<input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
<u>Black Clay</u>		<u>2</u>	<u>6</u>	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry		
<u>lt. Brown Clay</u>		<u>6</u>	<u>23</u>	<input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock		
<u>Frise Sand</u>		<u>23</u>	<u>28</u>	<input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
<u>Gravel</u>		<u>28</u>	<u>50</u>	9. Casing: Material <u>PVC</u> Height: Above or below		
				Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in.		
				RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>24</u> lbs./ft.		
				Dia. <u>6</u> in. to <u>30</u> ft. depth Wall Thickness: inches or		
				Dia. <u>6</u> in. to <u>30</u> ft. depth Gage No. <u>200</u>		
				10. Screen: Manufacturer's name <u>Sunflower Plastics</u>		
				Type <u>RMP</u> Dia. <u>5 1/2</u>		
				Slot gauge <u>18</u> Length <u>20</u>		
				Set between <u>30</u> ft. and <u>50</u> ft.		
				Gravel pack? <u>Yes</u> Size range of material <u>1/2-5</u>		
				11. Static water level: <u>23</u> ft. below land surface Date <u>10-7-77</u>		
				12. Pumping level below land surfaces:		
				<u>23</u> ft. after <u>0</u> hrs. pumping <u>0</u> g.p.m.		
				<u>0</u> ft. after <u>0</u> hrs. pumping <u>0</u> g.p.m.		
				Estimated maximum yield <u>20</u> g.p.m.		
				13. Water sample submitted: <u>Yes</u> <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u>10-7-77</u>		
				14. Well head completion: <u>24</u> inches above grade		
				<input type="checkbox"/> Pitless adapter <u>24</u> inches above grade		
				15. Well grouted? <u>Yes</u>		
				With: <input checked="" type="checkbox"/> Neat cement <input 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>Cattle</u>		
				ft. <u>0</u> Direction <u>SE</u> Type <u>Cattle</u>		
				Well disinfected upon completion? <u>Yes</u> <input checked="" type="checkbox"/> No <input type="checkbox"/>		
				17. Pump: <u>X</u> Not installed		
				Manufacturer's name <u>Carl Hayes Water Well</u>		
				Model number <u>224</u> HP <u>1/2</u> Volts <u>115</u>		
				Length of drop pipe <u>10</u> ft. capacity <u>20</u> g.p.m.		
				Type: <u>Submersible</u> <input type="checkbox"/> Turbine <input type="checkbox"/>		
				<u>Jet</u> <input type="checkbox"/> Reciprocating <input type="checkbox"/>		
				<u>Centrifugal</u> <input type="checkbox"/> Other <input type="checkbox"/>		
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: <u>X</u> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
				Signed: <u>Carl Hayes</u> Date: <u>10-7-77</u>		
				Authorized representative		

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

Form WWC-5