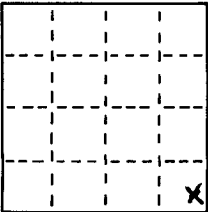


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

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

1 Location of well:	County <u>Edwards</u>	Township name <u>S. BROWN</u>	Fraction <u>SE 1/4 SE 1/4</u>	Section number <u>25</u>	Town number <u>T26-S</u>	Range number <u>R-19-W</u>
Distance and direction from nearest town or city: <u>11 N. 2 W. OF GREENSBURG</u>				3 Owner of well: <u>Blanche King</u> Address: <u>Greensburg Kansas</u>		
Locate with "X" in section below: N  W S 1 Mile		Sketch map:		4 Well depth: <u>70</u> ft. Date of completion: <u>4-29-75</u> Well diameter: <u>8 3/4</u> in.		
2 Type and color of material				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		
				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"/>		
				7 Casing: Material <u>RMP</u> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>18</u> in. Diam. <u>5</u> in. to <u>70</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>5</u> in. to <u>70</u> ft. depth		
				8 Screen: Manufacturer <u>Clay & Lowell</u> Type <u>RMP</u> Dia. <u>5 1/2</u> " Slot/groove <u>5/16</u> Length <u>20'</u> Set between <u>50</u> ft. and <u>70</u> ft. Fittings: Grovel pack <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material <u> </u>		
				9 Static water level: <u>36</u> ft. below land surface Date <u>4-29-75</u>		
(use a second sheet if needed)				10 Pumping level below land surfaces: <u>36</u> ft. after <u>1</u> hrs. pumping <u>3 1/2</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>20</u> g.p.m.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>		
				12 Well head completion: <input type="checkbox"/> Pitless adapter <u>18</u> 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"/> <u> </u> Depth: From <u>0</u> ft. to <u>10</u> ft.		
				14 Nearest source of possible contamination: ft. <u>Pasture Well</u> Direction <u>Well</u> Type <u> </u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Windsor</u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u>52</u> ft. capacity <u>3 1/2</u> g.p.m. 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		
				16 Remarks: elevation		
				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. <u>Carl Hayse Water Well Serv</u> <u>224</u> Business name License No. Address <u>603 So Maple</u> Signed <u>Carl Hayse</u> Date <u>4-29-75</u> Authorized representative		
				Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5