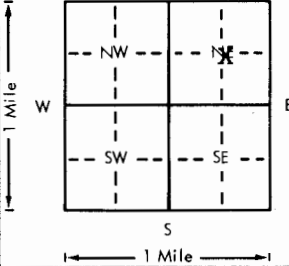


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <b>Kiowa</b>	Fraction 1/4 <b>Center</b> 1/4	Section number <b>5</b>	Township number T <b>27</b> S R	Range number <b>18</b> E W
2. Distance and direction from nearest town or city: <b>8 miles North of Greensburg</b> Street address of well location if in city:			3. Owner of well: <b>Vernon C. Brown</b> R.R. or street: <b>Route 2</b> City, state, zip code: <b>Lewis, KS 67552</b>		
4. Locate with "X" in section below: N 1 Mile W E S 1 Mile			Sketch map: 		
5. Type and color of material			From	To	6. Bore hole dia. <u>24</u> in. Completion date <u>12-20-76</u> Well depth <u>172</u> ft.
Sandy Top soil			0	11	7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary
Sand			11	23	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
Soft yellow clay			23	32	9. Casing: Material <u>steel</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>10'</u> <input checked="" type="checkbox"/> RMP PVC <input type="checkbox"/> Weight <u>30.3</u> lbs./ft. Dia. <u>16</u> in. to <u>80</u> ft. depth Wall Thickness: inches or Dia. <u>16</u> in. to <u>132</u> ft. depth gage No. <u>7 ga.</u>
Sand & gravel & thin clay streaks			32	70	10. Screen: Manufacturer's name <u>Doerr</u> Type <u>Double-slot</u> Dia. <u>16"</u> <input checked="" type="checkbox"/> Slot gauze <u>1/8</u> Length <u>60'</u> Set between <u>80</u> ft. and <u>100</u> ft. <u>132</u> ft. and <u>172</u> ft. Gravel pack? <u>yes</u> Size range of material <u>3/8-200</u>
Yellow clay			70	78	11. Static water level: _____ mo./day/yr. <u>38'6"</u> ft. below land surface Date <u>12-20-76</u>
Sand & gravel			78	99	12. Pumping level below land surfaces: <u>Not Checked</u> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.
Hard clay (Brown)			99	116	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
Sand - fine			116	120	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>10' above</u> grade
Hard cemented clay			120	121	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.
Soft sandy clay			121	132	16. Nearest source of possible contamination: <u>FIELD</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Sand & gravel & thin clay streaks			132	144	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
Hard cemented clay			144	146	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. <b>Clarke Well &amp; Equ., Inc. 185</b> Business name _____ License No. _____ Address <u>Great Bend KS 67530</u> Signed <u>[Signature]</u> <u>2-2-1978</u> Authorized representative _____ Date _____
Sand & gravel			146	172	
(Use a second sheet if needed)					
18. Elevation:  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:  <b>This report is late because log was overlooked.</b>				

27 18E 5-1/4 1/4 CNE

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

Form WWC-5