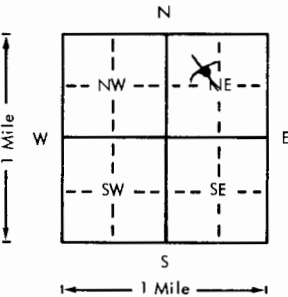


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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>Kiowa</u> Fraction <u>SE 1/4 NW 1/4 NE 1/4</u> Section number <u>16</u> Township number <u>T 27 S</u> Range number <u>R 18 W</u>	
2. Distance and direction from nearest town or city: <u>6 N. Greensburg Kansas</u> Street address of well location if in city:	
3. Owner of well: <u>Earl Burnes</u> R.R. or street: City, state, zip code: <u>Greensburg Kansas</u>	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
<u>Top - Blow Sand</u>	From <u>0</u> To <u>4</u>
<u>Clay - Tan</u>	<u>4</u> <u>9</u>
<u>Clay - Br.</u>	<u>9</u> <u>16</u>
<u>Tan Clay</u>	<u>16</u> <u>23</u>
<u>Gravel</u>	<u>23</u> <u>60</u>
(Use a second sheet if needed)	
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:
6. Bore hole dia. <u>8 3/4</u> in. Completion date <u>5-28-75</u> Well depth <u>60</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 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
9. Casing: Material <u>PL</u> Height: Above or below Threaded <input type="checkbox"/> Welded <u>GI</u> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>5</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>200</u>	
10. Screen: Manufacturer's name <u>Jess + Lowell</u> Type <u>RMP</u> Dia. <u>5 1/2</u> Slot gauze <u>1/8</u> Length <u>20</u> Set between <u>40</u> ft. and <u>60</u> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <u>No</u> size range of material <input type="checkbox"/>	
11. Static water level: <input checked="" type="checkbox"/> mo./day/yr. <u>26</u> ft. below land surface Date <u>5-28-75</u>	
12. Pumping level below land surfaces: <u>26</u> ft. after <u>1</u> hrs. pumping <u>10</u> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <u>30</u> g.p.m.	
13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>12</u> inches above grade	
15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>14</u> ft.	
16. Nearest source of possible contamination: <u>100</u> ft. Direction <u>NE</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Flint & Walling</u> Model number <u>7BA12</u> HP <u>3/4</u> Volt <u>230</u> Length of drop pipe <u>45</u> ft. capacity <u>10</u> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
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. <u>Carl Kaye</u> Water Well Sew. <u>224</u> Business name License No. <u>603 So. Maple Greensburg, KS</u> Signed <u>Carl Kaye</u> Date <u>5-28-75</u> Authorized representative	

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

Form WWC-5