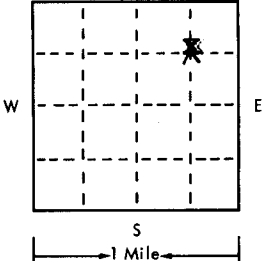


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

27 19 W C N E 33
T R sec 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 Kiowa	Township name	Fraction C/NE	Section number 33	Town number 727512 II	Range number 2E R 19W	
Distance and direction from nearest town or city: 4 miles north of Joy, Ks. Street address of well location if in city:				3 Owner of well: Dwain Davis Address: Mullinville, Ks.			
Locate with "X" in section below: N  W E S 1 Mile		Sketch map:		4 Well depth: 163 ft. Date of completion 1-30-75 Well diameter 7 7/8 .			
2 Type and color of material				From		To	
				From		To	
Sandy top soil				0		3	
Fine sand & sandy clay				3		10	
Fine sand				10		18	
Brown & gray clay				18		25	
Fine sand & sandy clay				25		37	
Brown & sandy clay				37		45	
Sand & gravel				45		49	
Yellow brown clay				49		52	
Sand & gravel clean, coarse, loose				52		105	
Brown & white clay				103		116	
Sand & gravel clean, coarse, loose				116		125	
Brown & white clay w/streaks of sand & gravel				125		130	
Sand & gravel clean, coarse, loose				130		140	
Brown clay				140		143	
Sand & gravel loose medium				143		149	
White Rock				149		149 1/2	
Sand & gravel loose, clean, coarse				149 1/2		158	
16 Remarks: elevation Yellow brown light gray clay				158		163	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley				6 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 0 ft. to 10 ft.			
7 Casing: Material pvc (height above) below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 18 in. Diam. _____ Weight 160 lbs./ft. 4 in. to 140 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth				8 Screen: Manufacturer R & B Type pvc Dia. 4 <input checked="" type="checkbox"/> Gauze 1/16 Length 20 Set between 140 ft. and 160 ft. Fittings: 3/4- 3/8- 1/16 Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material cm-3			
				9 Static water level: 62 ft. below land surface Date 1-30-75			
10 Pumping level below land surfaces: NA _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.				11 Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date 2-3-75			
12 Well head completion: <input type="checkbox"/> Pitless adapter 18 inches above grade				13 Nearest source of possible contamination: house & corral ft. 2600 Direction SW Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No			
15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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				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. Rosencrantz-Bemis 134 Business name _____ license No. _____ Address Great Bend, Ks. Signed Fredia Dodson Date 1-3-75 Authorized representative			

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

Form WWC-5