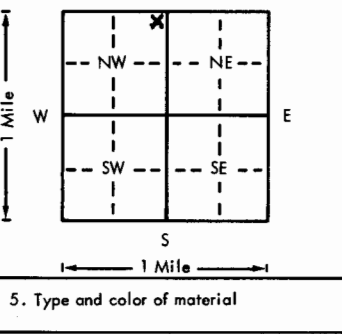


USE TYPEWRITER OR BALL  
POINT PEN—PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and  
Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

County <b>FORD</b>		Fraction <b>NE 1/4 NE 1/4 NW 1/4</b>	Section number <b>9</b>	Township number <b>T 27</b>	Range number <b>S R 23</b>
1. Location of well:			3. Owner of well: <b>Raymond Dupece</b>		
2. Distance and direction from nearest town or city: <b>7 E Dodge</b>			R.R. or street: <b>Rt 3</b>		
Street address of well location if in city:			City, state, zip code: <b>Dodge City KS 67801</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>8</b> in. Completion date <b>12/17/76</b>	
				Well depth <b>150</b> ft.	
5. Type and color of material		From To		7. Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dig	
Soil		0 2		<input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
SAND		2 6		8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry	
GRAVEL		6 21		<input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock	
CLAY		21 110		<input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
GRAVEL		110 146		9. Casing: Material <b>PC</b> Height: <b>above</b> or below	
Rock		146 149		Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>16</b> in.	
SHALE		149 150		RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>250</b> lbs./ft.	
				Dia. <b>6</b> in. to <b>150</b> ft. depth Wall Thickness: inches or	
				Dia. <b>6</b> in. to <b>150</b> ft. depth gage No. <b>250</b>	
				10. Screen: Manufacturer's name <b>Jess &amp; Lowen</b>	
				Type <b>PC</b> Dia. <b>6</b>	
				Gauge <b>116</b> Length <b>3</b>	
				Set between <b>120</b> ft. and <b>150</b> ft.	
				Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8</b>	
				11. Static water level: <b>N</b> mo./day/yr.	
				<b>30</b> ft. below land surface Date <b>12/10/76</b>	
				12. Pumping level below land surfaces: <b>NA</b>	
				ft. after hrs. pumping g.p.m.	
				ft. after hrs. pumping g.p.m.	
				Estimated maximum yield g.p.m.	
				13. Water sample submitted: mo./day/yr.	
				Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date	
				14. Well head completion:	
				<input checked="" type="checkbox"/> Pitless adapter <b>16</b> 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 <b>3</b> ft. to <b>30</b> ft.	
				16. Nearest source of possible contamination:	
				ft. <b>150</b> Direction <b>E</b> Type <b>septic</b>	
				Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump:	
				Not installed	
				Manufacturer's name <b>Repa</b>	
				Model number <b>8010810</b> HP <b>2</b> Volts <b>230</b>	
				Length of drop pipe <b>84</b> ft. capacity <b>47</b> 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	
18. Elevation:		19. Remarks:		20. Water well contractor's certification:	
<b>Level</b>				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.	
Topography:				<b>Cragg Drilling</b> License No. <b>111</b>	
<input checked="" type="checkbox"/> Hill				Business name	
<input checked="" type="checkbox"/> Slope				Address <b>Rt 1 Dodge City KS</b>	
<input checked="" type="checkbox"/> Upland				Signed <b>Raymond Dupece</b> Date <b>12/17/76</b>	
<input type="checkbox"/> Valley				Authorized representative	

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

Form WWC-5

$\frac{27}{T}$        $\frac{23}{R}$        $\frac{9}{Sec}$        $\frac{NE}{1/4}$   $\frac{NE}{1/4}$   $\frac{NE}{1/4}$