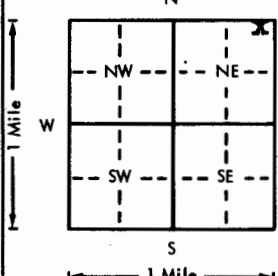


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Ford</b>	Fraction <b>Lot #288</b> <b>NE 1/4 NE 1/4 NE 1/4</b>	Section number <b>#10</b>	Township number <b>T 27</b>	Range number <b>S R 24 E/W</b>
2. Distance and direction from nearest town or city: <b>The well is located in the city of Wilroads Garden.</b>			Owner of well: <b>Hugh Anderson</b> R.R. or street: City, state, zip code: <b>Wilroads Garden, Kansas 67801</b>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>8</b> in. Completion date <b>5-10-76</b> Well depth <b>155</b> ft.		
				7. <input checked="" 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		
5. Type and color of material		From		To		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
Top soil & medium to coarse sand		0		15		9. Casing: Material <b>RMP</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>8</b> in. to <b>155</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>250</b>
Coarse sand & clay		15		30		10. Screen: Manufacturer's name <b>Sunflower</b> Type <b>RMP</b> Dia. <b>5"</b> Slot <b>1/8"</b> Length <b>20 ft.</b> Set between <b>130</b> ft. and <b>155</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> yes Size range of material <b>1/4"</b>
Clay & fine sand		30		45		11. Static water level: <input type="checkbox"/> mo./day/yr. <b>18</b> ft. below land surface Date <b>5-10-76</b>
Fine sand		45		90		12. Pumping level below land surfaces: <b>18</b> ft. after <b>2</b> hrs. pumping <b>60</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>125</b> g.p.m.
Fine to coarse sand		90		105		13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>
Coarse sand		105		150		14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>12</b> inches above grade
Coarse sand, clay and blue shale		150		160		15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>5</b> ft. to <b>30</b> ft.
						16. Nearest source of possible contamination: ft. <b>75</b> Direction <b>NE</b> Type <b>Sewer</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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
18. Elevation:		19. Remarks:		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>JOE'S WELL SERVICE</b> <b>179</b> Business name License No. Address <b>Box 174 Cimarron, Ks.</b> Signed <b>Larry L Crick</b> Date <b>5-25-76</b> Authorized representative		

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

Form WWC-5