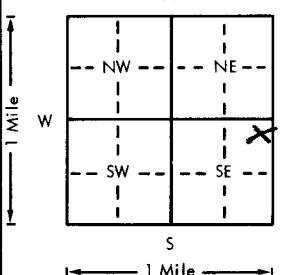


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 Gray	Fraction NE 1/4 NE 1/4 SE 1/4	Section number 3	Township number T 27	Range number S R 29	E/W E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:	8 miles south of Ingalls, Kansas			3. Owner of well: LLoyd Frank R.R. or street: R.R. City, state, zip code: Ingalls, Kansas 67853		
4. Locate with "X" in section below:	Sketch map: 			6. Bore hole dia. 8 in. Completion date 7-11-77 Well depth 235 ft. 7. 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 RMP <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. RMP CC <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 235 ft. depth Wall thickness: inches or Dia. _____ in. to _____ ft. depth Gage No. 250		
5. Type and color of material	From	To	10. Screen: Manufacturer's name Sunflower Type RMP <input type="checkbox"/> Dia. 5" <input type="checkbox"/> Slot/gage 1/8" <input type="checkbox"/> Length 20 ft. Set between 210 ft. and 230 ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material 1/16			
Brown sandy topsoil	0	15	11. Static water level: 85 mo./day/yr. ft. below land surface Date 7-14-77			
Clay & fine sand	15	45	12. Pumping level below land surfaces: 90 ft. after 1 hrs. pumping 50 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 65 g.p.m.			
Clay	45	60	13. Water sample submitted: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date			
Fine to medium sand & clay	60	75	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 12 inches above grade			
Medium sand	75	90	15. Well grouted? <input checked="" type="checkbox"/> Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 7 ft. to 17 ft.			
Coarse sand	90	105	16. Nearest source of possible contamination: ft. 30 Direction west Type Barnyard			
Coarse sand & clay	105	135	Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Coarse sand & clay	135	165	17. Pump: Manufacturer's name Flint & Walling Model number 15BK12 HP 1 1/2 Volts 230 Length of drop pipe 147 ft. capacity 15 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			
Coarse sand & clay	165	195	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. Joe's Well Service 179 Business name <input type="checkbox"/> Address Box 171 Cimarron, Ks. Signed <input type="checkbox"/> Date <input type="checkbox"/> Authorized representative <input type="checkbox"/>			
Coarse sand & clay layers	195	210				
Coarse sand & sand rock layers	210	225				
Coarse sand, clay & shale	225	240				
(Use a second sheet if needed)						
18. Elevation:	19. Remarks: has excellent drainage to the west away from the well					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5