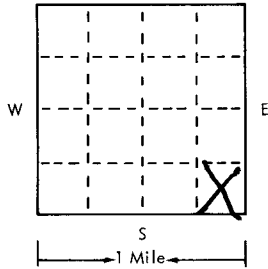


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

T R EW sec 1/4 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 KIOWAN	Township name EUREKA	Fraction SE	Section number 22	Town number 27	Range number 9																		
Distance and direction from nearest town or city: 2 miles East 3 miles South of Penasa			3 Owner of well: OTIS MOORE Address: Penasha Kansas																					
Locate with "X" in section below: N 		Sketch map: NO BUILDING Grass Pasture NEW House going to be BUILT LATER		4 Well depth: 60 ft. Date of completion 2-18-76 Well diameter 8 in. BORF																				
2 Type and color of material		From To		5 <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																				
				6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>																				
<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:50%;">TOP Soil</td><td style="width:10%;">0</td><td style="width:10%;">1</td></tr> <tr><td>course sand Dark Brown</td><td>1</td><td>30</td></tr> <tr><td>Clay and fine sand.</td><td>3</td><td>40</td></tr> <tr><td>Hard sand Rock</td><td>40</td><td>45</td></tr> <tr><td>Clay Blue</td><td>45</td><td>50</td></tr> <tr><td>course Gravel</td><td>50</td><td>60</td></tr> </table>		TOP Soil	0	1	course sand Dark Brown	1	30	Clay and fine sand.	3	40	Hard sand Rock	40	45	Clay Blue	45	50	course Gravel	50	60			7 Casing: Material PVC Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. Diam. 5 in. to 60 ft. depth Weight ___ lbs./ft. ___ Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
TOP Soil	0	1																						
course sand Dark Brown	1	30																						
Clay and fine sand.	3	40																						
Hard sand Rock	40	45																						
Clay Blue	45	50																						
course Gravel	50	60																						
<p style="text-align:center;">Detail Dept of Well 10 feet Clay Bottom</p>				8 Screen: Manufacturer JESS + LOWELL Type PVC Dia. 5" Slot/gauze 3/16 Length 10ft Set between 50 ft. and 60 ft. ___ Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 4																				
				9 Static water level: 50 ft. below land surface Date 2-18-76																				
				10 Pumping level below land surfaces: ___ ft. after NA pumping ___ g.p.m. ___ ft. after NA pumping ___ g.p.m. Estimated maximum yield ___ g.p.m.																				
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date 2-18-76																				
				12 Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade																				
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> ___ Depth: From 1 ft. to 10 ft.																				
				14 Nearest source of possible contamination: PASTURE ft. ___ Direction ___ Type ___ Well disinfected upon completion? <input checked="" 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																				
16 Remarks: elevation				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. Weber Well Service Business name License No. ___ Address: Northwell Kan 226 Signed: John Weber Date 2-18-76 Authorized representative																				
<p>(use a second sheet if needed)</p> <p>Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley</p>																								

27 9W 22 SE

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

Form WWC-5