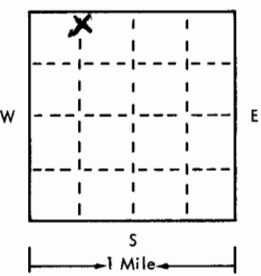


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County Pratt	Township name	Fraction SW 1/4 NW 1/4	Section number 4	Town number 28 S	Range number 11 N	
Distance and direction from nearest town or city: Street address of well location if in city: 1 1/4 E. Cairo, Kan			3 Owner of well: LYN FITZ SIMMONS CUNNINGHAM, Kan				
Locate with "X" in section below: 			Sketch map: 4 Well depth: 97 ft. Date of completion 3-20-75 Well diameter 30 in.				
2 Type and color of material			From		To		5 <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary
							6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well
Top soil - Clay			0		13		7 Casing: Material R.I. Height: 36 below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 36 in. Diam. 16 in. to 27 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
							8 Screen: Manufacturer Doerr Type Gravel-Guard 16" Slot/gauze 1/4" Length 20' Set between 77 ft. and 97 ft. Fittings: 1/4 - 3/4" Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material
Sand - Gravel			13		25		9 Static water level: 15 ft. below land surface Date 3-20-75
Sand - Clay streaks			25		62		10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. 49 ft. after 3 hrs. pumping 1000 g.p.m. Estimated maximum yield 1000 g.p.m.
Sand			62		72		11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date
Sand - Gravel			72		97		12 Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade 36
							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 0 ft. to 10 ft.
							14 Nearest source of possible contamination: None ft. ____ Direction ____ Type ____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" 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.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
(use a second sheet if needed)							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. Kelly's Water Well Ser. 186 Business name R 2 Great Bend K's License No. ____ Address Kelly's Signed Kelly's Date 3-25-75 Authorized representative
16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley							

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

Form WWC-5