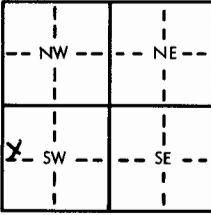


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Feo</b>	Fraction <b>SW 1/4 NW 1/4 SW 1/4</b>	Section number <b>8</b>	Township number <b>T 28 S</b>	Range number <b>R 24 E/W</b>
2. Distance and direction from nearest town or city <b>8 miles S Dodge</b>			3. Owner of well: <b>T. W. Bell</b> R.R. or street: <b>Dodge City HS</b> City, state, zip code:			
4. Locate with "X" in section below: <div style="text-align: center;">N 1 Mile W E S 1 Mile</div>  <div style="text-align: center;">Sketch map: <b>septic</b> <b>House</b>   <b>190'</b> <b>X</b></div>			6. Bore hole dia. <b>9</b> in. Completion date <b>4/4/77</b> Well depth <b>200</b> ft.			
5. Type and color of material			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			
			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 <b>PVC</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>20</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>250</b> lbs./ft. Dia. <b>5</b> in. to <b>200</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. <b>250</b>			
			10. Screen: Manufacturer's name <b>Jess &amp; Lowell</b> Type <b>PVC</b> Dia. <b>5</b> Slot/gauze <b>1/16</b> Length <b>3</b> Set between <b>170</b> ft. and <b>200</b> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft.			
			Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8"</b>			
(Use a second sheet if needed)			11. Static water level: <b>140</b> ft. below land surface Date <b>4/4/77</b> mo./day/yr.			
			12. Pumping level below land surfaces: <b>N A</b> <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.			
			13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date			
			14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>20</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>20</b> ft.			
18. Elevation: <b>Level</b> Topography: <input checked="" type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			16. Nearest source of possible contamination: ft. <b>190</b> Direction <b>N</b> Type <b>septic</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
			17. Pump: Manufacturer's name <b>Dempster</b> Not installed Model number <b>CH100SA</b> HP <b>1</b> Volts <b>230</b> Length of drop pipe <b>168</b> ft. capacity <b>15</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			
			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>CRAGG DEW</b> <b>111</b> Business name License No. Address <b>1501 AVE H</b> Signed <b>Ray Dwyer</b> Date <b>4/4/77</b> Authorized representative			
			19. Remarks:			

28  
24  
W  
8  
1/4 1/4 1/4