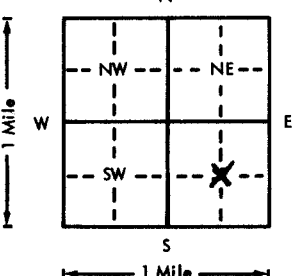


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Pratt</b>	Fraction <b>1/4 C 1/4 SE 1/4</b>	Section number <b>24</b>	Township number <b>T 29 S</b>	Range number <b>R 11 E</b>
2. Distance and direction from nearest town or city: <b>From Isabel, Ks. 4 mi east 2 mi north</b> Street address of well location if in city: <b>1/2 mi east north side</b>			3. Owner of well: <b>Charley Ridge</b> R.R. or street: <b>none</b> City, state, zip code: <b>Isabel, Ks. 67065</b>		
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. <b>2 1/2</b> in. Completion date Well depth <b>132</b> ft. <b>6-17-77</b>		
5. Type and color of material			7. <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		
			8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
			9. Casing: Material <b>Steel</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>18</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>1 1/2</b> in. to <b>132</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>7</b>		
			10. Screen: Manufacturer's name <b>Doerrs</b> Type <b>steel</b> Dia. <b>16" MN</b> Slot/gauge <b>3/16</b> Length <b>40'</b> Set between <b>92</b> ft. and <b>132</b> ft. <input type="checkbox"/> Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>20-40</b>		
			11. Static water level: <input type="checkbox"/> mo./day/yr. <b>17</b> ft. below land surface Date <b>1-7-77</b>		
			12. Pumping level below land surfaces: <b>660</b> ft. after <b>1</b> hrs. pumping <b>600</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>1400</b> g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <b>1-7-77</b>		
			14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> 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>0</b> ft. to <b>10</b> ft.		
			16. Nearest source of possible contamination: ft. <b>34</b> Direction <b>north</b> Type <b>septic</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>W.T.R.</b> Model number <b>4-125HC</b> HP <b>80</b> Volts Length of drop pipe <b>10.5</b> ft. capacity <b>1000</b> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
18. Elevation:			19. Remarks: <b>Dup.</b> <b>29 11 24 152</b>		
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>Rosemarie Bemis</b> <b>134</b> Business name License No. Address <b>Great Bend, Ks. 67530</b> Signed <b>Shandy Kilgore</b> Date <b>8-1-77</b> Authorized representative					

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

Form WWC-5