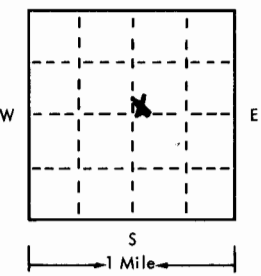


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Grant	Fraction SW 1/4 SW 1/4 NE 1/4	Section number 10	Town number 29	Range number 14
Distance and direction from nearest town or city: 2 N - Coats			3 Owner of well: Paul Bryan			
Street address of well location if in city:			Address: 501 IOWA Pratt			
Locate with "X" in section below: 			Sketch map:			4 Well depth: 150 ft. Date of completion 4-7-75 Well diameter 16 in.
2 Type and color of material No Log Made			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 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 <input checked="" type="checkbox"/> Fish Ponds			
			7 Casing: Material PVC Height: above below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 2 1/2 in. Diam. 6 1/2 in. Weight 160 lbs./ft. 150 8 in. to 150 ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth			
			8 Screen: Manufacturer Mopherson Plastics Type PVC Dia. 8" Slot/gauze 1/8 Length 40' Set between 110 ft. and 150 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/4 - 3/8			
			9 Static water level: 108 ft. below land surface Date 4-7-75			
			10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 500 g.p.m.			
			11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____			
			12 Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade 26"			
			13 Well grouted? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft.			
			14 Nearest source of possible contamination: ft. 1500 Direction NE Type Septic Tank Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15 Pump: <input type="checkbox"/> Not installed Manufacturer's name REDA Model number No No. HP .5 Volts 440 Length of drop pipe 130 ft. capacity 300 g.m.p. 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						
16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			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. Hank Bruse Well Ser. 103 Business name _____ License No. _____ Address 417 Stout Pratt Signed Hank Bruse Date 6-29-75 Authorized representative			

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

Form WWC-5