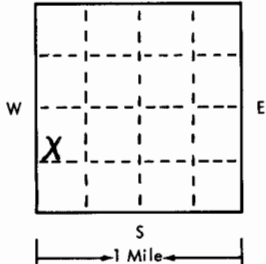


USE TYPEWRITER OR BALL
POINT PEN—PRESS FIRMLY,
PRINT CLEARLY.

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 Springvale	Fraction SW NW SW	Section number 26	Town number T29S	Range number R15W	
Distance and direction from nearest town or city: 1E 1S 3/4 W 1/2 S Street address of well location if in city: Springvale, Kans.				3 Owner of well: Mildred Hogart Address: Sun City, Kansas 67143			
Locate with "X" in section below: N  S W E				Sketch map:			
2 Type and color of material				From	To		
				Earth		0	3
				Brown Clay		3	15
				Sandy clay		15	28
				Sand		28	43
Coarse sand				43	53		
(use a second sheet if needed)							
16 Remarks: elevation Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				4 Well depth: 53 ft. Date of completion 9-30-75 Well diameter 3 in. 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 type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input checked="" type="checkbox"/> Pasture 7 Casing: Material RMP Height: above below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. Diam. 6-10E Weight 200 lbs./ft. 5 in. to 53 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No — in. to — ft. depth 8 Screen: Manufacturer Jess & Lowell Type RMP Dia. 5" Slot/gauze 1/16 Length 10' Set between 43 ft. and 53 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/16-3/8 9 Static water level: 21 ft. below land surface Date — 10 Pumping level below land surfaces: — ft. after — hrs. pumping — g.p.m. — ft. after — hrs. pumping — g.p.m. Estimated maximum yield 125 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 checked="" type="checkbox"/> 24 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 0 ft. to 10 ft. 14 Nearest source of possible contamination: ft. 80 Direction SE Type Water Road 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 42 ft. capacity 15 g.p.m. Type: Cylinder <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input checked="" type="checkbox"/> Other Windmill 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 Serv. 103 Business name License No. Address 1117 Stout Signed Jayne Bruse Date 9-30-75 Authorized representative			

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

Form WWC-5