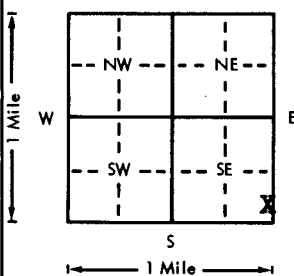


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 Kiowa	Fraction SE 1/4 SE 1/4 SE 1/4	Section number 8	Township number T 29 S R 19	Range number 19	X/W		
2. Distance and direction from nearest town or city: XXXXXX 4 South and 3 East of Mullinville, Kansas		3. Owner of well: Vernon Coffman R.R. or street: Mullinville, Kansas City, state, zip code:						
4. Locate with "X" in section below: 		Sketch map:		6. Bore hole dia. 9 7/8 in. Completion date _____ Well depth 188 ft. 1-22-76				
5. Type and color of material		From		To				
		Top soil		0		7		
		Sandy tan clay		7		110		
Medium sand		110		212				
				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 RMP Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface 24 in. RMP _____ PVC _____ Weight 220 lbs./ft. 100 Dia. 5 in. to 188 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gauge No. 320				
				10. Screen: Manufacturer's name Jess & Lowell Type RMP Dia. 5" Slot/gauze 1/8" Length 60' Set between 128 ft. and 188 ft. _____ ft. and _____ ft. Gravel pack? yes Size range of material 3/16"				
				11. Static water level: _____ mo./day/yr. 145 ft. below land surface Date 1/21/76				
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.				
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____				
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter _____ inches above grade				
				15. Well grouted? yes With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 4 ft. to 14 ft.				
				16. Nearest source of possible contamination: ft. 100 Direction south Type old well Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
				17. Pump: _____ Not installed Manufacturer's name Aermotor Model number SD 12 HP 1 1/2 Volts 220 Length of drop pipe 160 ft. capacity 10 g.p.m. Type: <input checked="" type="checkbox"/> Submersible _____ Turbine <input type="checkbox"/> Jet _____ Reciprocating <input type="checkbox"/> Centrifugal _____ Other				
				(Use a second sheet if needed)				
18. Elevation: Topography: ____ Hill ____ Slope <input checked="" type="checkbox"/> Upland ____ Valley	19. Remarks:		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. Friesen Windmill 252 Business name License No. Address XXXXXX Meade, Kansas Signed <i>[Signature]</i> Date 1-22-76 Authorized representative					

T 29 S R 19
E 3
S 4
SE 1/4 SE 1/4 SE 1/4

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

Form WWC-5