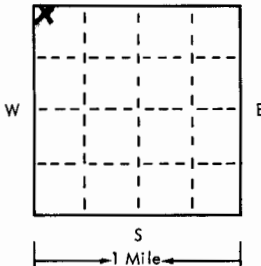


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Gray	Township name	Fraction NW, NW, NW	Section number 17	Town number 29 S	Range number 29 W
Distance and direction from nearest town or city: Approx. 15 8 6 E from Street address of well location if in city: Copeland, Ks				3 Owner of well: Address: Sherrill Esau Copeland, Ks.		
Locate with "X" in section below: N  W E S 1 Mile		Sketch map:		4 Well depth: 325 ft. Date of completion 30 Jun 75 Well diameter 28 in.		
2 Type and color of material				5 <input type="checkbox"/> Cable tool <input 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 checked="" 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 type="checkbox"/>		
				7 Casing: Material STL Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. Diam. 16 in. to 325 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No in. to in. ft. depth		
				8 Screen: Manufacturer Doery T Foster Type Louver T mill slot 16 Slot/gauze 1/8 Length 140 Set between 185 ft. and 325 ft. Fittings: 8-2 mm Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material		
				9 Static water level: 85 ft. below land surface Date 15 Apr 75		
				10 Pumping level below land surfaces: 110 ft. after 1 hrs. pumping 1557 g.p.m. 120 ft. after 1 hrs. pumping 2310 g.p.m. Estimated maximum yield 2800 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"/> Inches above grade		
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From 0 ft. to 10 ft.		
				14 Nearest source of possible contamination: UNK ft. Direction Type Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(use a second sheet if needed)				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name Layne Model number 12 TH HP 100 Volts Length of drop pipe 160 ft. capacity 2000 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		
				16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" 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. Layne Western Co 150 Business name License No. Address Garden City Signed [Signature] Date 11 Sep 75 Authorized representative		

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

Form WWC-5

