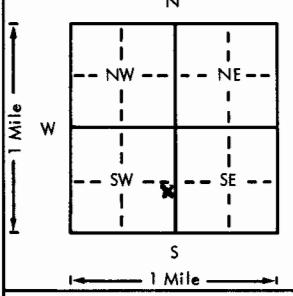


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Gray</b>	Fraction <b>SE 1/4 SE 1/4 SW 1/4</b>	Section number <b>3</b>	Township number <b>T 29</b>	Range number <b>S R 30 E N</b>	
2. Distance and direction from nearest town or city: <b>2 mi E of Copeland Ks.</b>	Street address of well location if in city: <b>Copeland, Kansas 67837</b>	3. Owner of well: <b>Ph. I Smith</b> R.R. or street: City, state, zip code:				
4. Locate with "X" in section below:  		Sketch map:  				
5. Type and color of material		From <b>0</b>	To <b>143</b>	6. Bore hole dia. <b>9</b> in. Completion date <b>8/27/76</b> Well depth <b>320</b> ft.		
<b>Overburden</b>		<b>143</b>	<b>315</b>	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		
<b>Sand + Gravel</b>		<b>315</b>	<b>320</b>	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		
<b>Blue Clay</b>		<b>320</b>		9. Casing: Material <b>PVC</b> Height <b>Above</b> or below Threaded <input type="checkbox"/> Welded <b>g1</b> Surface <b>14</b> in. RMP <input type="checkbox"/> PVC <b>X</b> Weight <input type="checkbox"/> lbs./ft. Dia. <b>5</b> in. to <b>260</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth <b>gage No. 0.258</b>		
				10. Screen: Manufacturer's name <b>J+L</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/gauze <b>1/16"</b> Length <b>60</b> Set between <b>260</b> ft. and <b>320</b> ft. ft. and <b>ft.</b> Gravel pack? <b>Yes</b> Size range of material <b>1/8</b>		
				11. Static water level: <b>143</b> ft. below land surface Date <b>mo./day/yr.</b>		
				12. Pumping level below land surfaces: <b>ft.</b> after <b>hrs.</b> pumping <b>g.p.m.</b> <b>ft.</b> after <b>hrs.</b> pumping <b>g.p.m.</b> Estimated maximum yield <b>60</b> g.p.m.		
				13. Water sample submitted: <b>mo./day/yr.</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <b>_____</b>		
				14. Well head completion: <b>Pitless adapter</b> <b>14</b> Inches above grade		
				15. Well grouted? <b>Yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>3</b> ft. to <b>13</b> ft.		
				16. Nearest source of possible contamination: <b>ft. 70</b> Direction <b>E</b> Type <b>Corral</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <b>_____</b> Model number <b>_____</b> HP <b>_____</b> Volts <b>_____</b> Length of drop pipe <b>_____</b> ft. capacity <b>_____</b> g.p.m. Type: <input type="checkbox"/> Submersible <b>_____</b> Turbine <b>_____</b> <input type="checkbox"/> Jet <b>_____</b> Reciprocating <b>_____</b> <input type="checkbox"/> Centrifugal <b>_____</b> Other <b>_____</b>		
(Use a second sheet if needed)				18. Elevation:  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		
19. Remarks:		<p><i>Well to be Completed by:</i>  <b>Dunham Drilling</b>  <b>Copeland, KS 67837</b> </p>				
		<p>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>T+L Water Well 142</b>      Business name <b>_____</b> License No. <b>_____</b>      Address <b>Box 816 Liberal KS 67901</b>      Signed <b>CN Waggoner</b> Date <b>9/1/76</b>      Authorized representative <b>_____</b></p>				