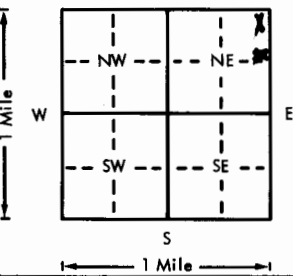


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Haskell	Fraction NE 1/4 NE 1/4 NE 1/4	Section number 30	Township number T 29 S	Range number R 31 E/W
2. Distance and direction from nearest town or city: 1 W. 1/2 S. of Tice, KS. Street address of well location if in city:			3. Owner of well: Earl C. Whitaker R.R. or street: City, state, zip code: Copeland, KS.		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 		6. Bore hole dia. 9 in. Completion date 5/9/78 Well depth 380 ft.	
5. Type and color of material		From To		7. 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 PHS Height: Above or below Threaded <input type="checkbox"/> Welded 51 Surface 14 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 310 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 0.258	
				10. Screen: Manufacturer's name J+L Type PVC Dia. <input type="checkbox"/> Slot/gauze 1/16 Length 70 Set between 310 ft. and 380 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? Yes Size range of material 1/8	
				11. Static water level: <input type="checkbox"/> mo./day/yr. 190 ft. below land surface Date 5/9/78	
(Use a second sheet if needed)				12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 80 g.p.m.	
				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <input type="checkbox"/>	
				14. Well head completion: <input type="checkbox"/> Pitless adapter 14 Inches above grade	
				15. Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 3 ft. to 13 ft.	
				16. Nearest source of possible contamination: ft. 200 Direction NW Type Fuel tank Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
				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. T+W Water Well 142 Business name License No. Address Box 816 Liberal, KS. Signed C. W. Waggoner Date 5/9/78 Authorized representative	
				18. Elevation:	
				19. Remarks: Well to be completed by: Dunham Drilling Copeland, KS.	
				Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	

29 31 32 1/4 1/4 1/4 NE NE NE

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

Form WWC-5