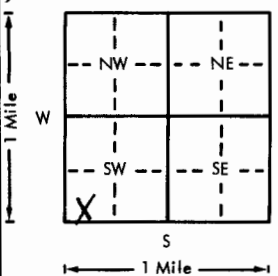


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>Grant</b> Section <b>SW 1/4 SW 1/4 NW 1/4</b> Section number <b>9</b> Township number <b>T 29 S R 37 E/W</b> Range number	
2. Distance and direction from nearest town or city: <b>2 m. South, 1/2 m. West, 1/2 m. South from Ulysses, Ks. 67880</b> 3. Owner of well: <b>Clifford Miller</b> R.R. or street: City, state, zip code: <b>Ulysses, Ks. 67880</b>	
4. Locate with "X" in section below: Sketch map:  <p>X water well ↓ ↓ ↓ Drainage House X Septic Tank</p>	
6. Bore hole dia. <b>2 1/8</b> in. Completion date <b>11-20-76</b> Well depth <b>475</b> ft.	
7. <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	
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 <b>Styro</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>475</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>0320</b>	
10. Screen: Manufacturer's name <b>Scumflow</b> <b>Plastic</b> Type _____ Dia. <b>5</b> Slot/gauze <b>.06 (1/16)</b> Length <b>60'</b> Set between <b>475</b> ft. and <b>435</b> ft. <b>435 Pl. 335 to ft. and 315 Per. 0 pl. ft.</b> Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/4 x 1/8</b>	
11. Static water level: _____ mo./day/yr. <b>180</b> ft. below land surface Date <b>11-20-76</b>	
12. Pumping level below land surfaces: <b>N.A.</b> _____ 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>12</b> Inches above grade	
15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>5</b> ft. to <b>20</b> ft.	
16. Nearest source of possible contamination: ft. <b>100</b> Direction <b>S.W.</b> Type <b>Septic Tank</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <b>N.A.</b> <input type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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	
18. Elevation: 19. Remarks: <b>Concrete slab to be installed by customer.</b>	
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>Wagner Drilling 253</b> Business name License No. Address <b>Box 10</b> Signed <b>Deverne Wagner</b> Date <b>12-7-76</b> Authorized representative	

29  
37  
9  
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1/4 1/4 1/4  
Sustained

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

Form WWC-5