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

almena NW

WATER WELL RECORD
KSA 82a-1201-1215

BBA

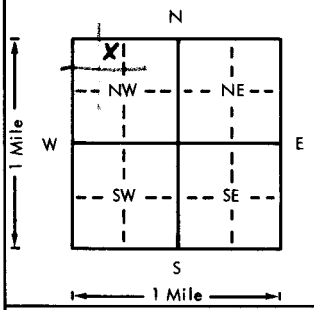
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Norton	NE 1/4 NW 1/4 NW 1/4	20	T 2 S	R 21 E/W

2. Distance and direction from nearest town or city: 2 miles South west of
Street address of well location if in city: Almena KS

3. Owner of well: Clair Alexander.
R.R. or street:
City, state, zip code: Almena KS 67622

4. Locate with "X" in section below:



Sketch map:

Pasture well.

6. Bore hole dia. 9 in. Completion date 9/03/76
Well depth 22 ft.

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning X Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material PLS. Height: Above or below
Threaded ___ Welded ___ Surface 12 in.
RMP ___ PVC X Weight 275 lbs./ft.
Dia. 5 in. to 65 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. 5/16

5. Type and color of material	From	To
Clay, Black	0	52
Silica	52	65
Sand V.F. (Dirty)	65	72
Brock ?		
(Use a second sheet if needed)		

10. Screen: Manufacturer's name M. P. I.
Type PVC Dia.
Slot gauze .032 Length 10'
Set between 65 ft. and 75 ft.
ft. and ft.
Gravel pack? yes Size range of material 8x4u.

11. Static water level: mo./day/yr.
50 ft. below land surface Date 9/03/76

12. Pumping level below land surfaces:
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 20 g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes X No Date

14. Well head completion:
__ Pitless adapter 12 Inches above grade

15. Well grouted? yes
With: __ Neat cement X Bentonite __ Concrete
Depth: From 0 ft. to 30 ft.

16. Nearest source of possible contamination:
ft. ___ Direction ___ Type NONE
Well disinfected upon completion? X Yes __ No

17. Pump: X Not installed
Manufacturer's name
Model number HP Volts
Length of drop pipe ft. capacity g.p.m.
Type:
__ Submersible __ Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

T 2 S R 21 E/W Sec 20 NE 1/4 NW 1/4 NW 1/4

18. Elevation:
Topography:
__ Hill
__ Slope
X Upland
__ Valley

19. Remarks: 2173
Send more WWC-5 forms.

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.
Fawcett & Son 167
Business name License No.
Address Norton KS
Signed [signature] Date 9/08/76
Authorized representative

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

Form WWC-5