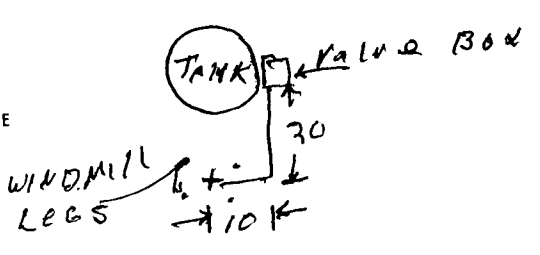


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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: Kiowa		Fraction: ne 1/4 ne 1/4 ne 1/4		Section number: 10	Township number: T 30 S R 16 E/W	Range number: 16	
2. Distance and direction from nearest town or city: Street address of well location if in city: 2 1/2 N Belvidere				3. Owner of well: Anchor D Ranch R.R. or street: Belvidere, Ks. City, state, zip code:			
4. Locate with "X" in section below: N 1 Mile W E S 1 Mile				Sketch map: 		6. Bore hole dia. 10 in. Completion date 12/14/76 Well depth 80 ft.	
5. Type and color of material				From	To	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	
						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	
				soil	0	3	<input checked="" type="checkbox"/> Casing: Material _____ Height: <u>Above</u> or below Threaded _____ Welded _____ Surface 18 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 6 in. to 80 ft. depth Wall thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 256
				clay	3	14	10. Screen: Manufacturer's name Peerless Type pvc Dia. 6 Slot/gauze .035 Length 6 Set between 74 ft. and 80 ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/2 dn
				sand	14	17	11. Static water level: _____ mo./day/yr. 50 ft. below land surface Date 12/14/76
				clay	17	24	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.
				sand	24	27	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____
				clay	27	31	14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 15 inches above grade
				sand	31	32	15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From 3 ft. to 15 ft.
				clay	32	62	16. Nearest source of possible contamination: ft. _____ Direction all Type lot Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
coarse sand	62	72	17. Pump: _____ Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe 63 ft. capacity 5 g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input checked="" type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other				
shale	72	79	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. Lyman Bros License No. 140 Address Med Lodge Signed W A Lyman Date 1-4-77 Authorized representative				
clay	79	80					
(Use a second sheet if needed)							
18. Elevation: Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: Slab to be poured by customer					

30 16 10 MEANE

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

Form WWC-5