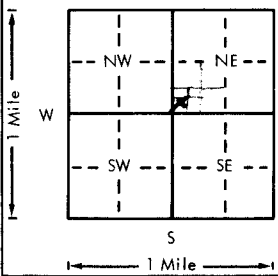


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

SIMMONS  
CREEK

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

1. Location of well:	County <b>Clark</b>	Fraction <b>SW 1/4 SW 1/4 NE 1/4</b>	Section number <b>29</b>	Township number <b>T 30 S</b>	Range number <b>R 23 E/W</b>
2. Distance and direction from nearest town or city: <b>5 miles S Bloom As</b>			3. Owner of well: <b>Gary Esplund</b> R.R. or street: <b>RR</b> City, state, zip code: <b>Minneola, Ks 67865</b>		
4. Locate with "X" in section below: 			6. Bore hole dia. <b>8"</b> in. Completion date <b>3-28-79</b> Well depth <b>140</b> ft.		
5. Type and color of material			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		
Soil			8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
Clay			9. Casing: Material <b>Plastic</b> Height: Above of <del>Below</del> <b>XXXX</b> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>18"</b> in. RMP <input type="checkbox"/> PVC <b>Glue</b> Weight <b>250</b> lbs./ft. Dia. <b>5</b> in. to <b>120</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>250</b>		
Sand & gravel			10. Screen: Manufacturer's name <b>Jess &amp; Lowell</b> Type <b>Plastic</b> Dia. <b>5"</b> Slot <del>Size</del> <b>1/4</b> Length <b>20'</b> Set between <b>120</b> ft. and <b>140</b> ft. ft. and <input type="checkbox"/> ft.		
Gravel			Gravel pack? <b>yes</b> Size range of material <b>1/4</b>		
Brock 140			11. Static water level: <del>44</del> <b>119</b> ft. below land surface Date <b>3-28-79</b> <b>21' sat then</b>		
			12. Pumping level below land surfaces: <b>N/A</b> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
			14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>18"</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>20</b> ft.		
			16. Nearest source of possible contamination: <b>Pasture</b> ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <b>Pasture</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 <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		
(Use a second sheet if needed)					
18. Elevation:	19. Remarks:		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>Cragg Well Drilling 111</b> Business name License No. Address <b>Dodge City, Ks 67801</b> Signed: <b>Gary Esplund</b> Date <b>3-28-79</b> Authorized representative		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	<b>7670</b> <b>2518</b> <b>140</b> <b>2375</b>				

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

Form WWC-5