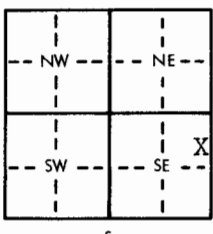


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Haskell</b>	Fraction <b>SE 1/4 NE 1/4 SE 1/4</b>	Section number <b>30</b>	Township number <b>T 30 S</b>	Range number <b>R 32 E/W</b>
2. Distance and direction from nearest town or city: <b>4 1/2 South, 1/2 West of Sublette, Ks.</b> Street address of well location if in city:			3. Owner of well: <b>Winnie V. Wallace</b> R.R. or street: <b>Sublette, Kansas 67877</b> City, state, zip code:			
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: 			
5. Type and color of material			From	To	6. Bore hole dia. <b>9 7/8</b> in. Completion date <b>6-22-76</b> Well depth <b>398</b> ft.	
Top soil			0	12	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	
Fine sand with clay streaks			13	112	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	
<del>Med. to lar. sand</del> Clay			113	123	9. Casing: Material <b>PVC</b> Height: Above or below <b>surface</b> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>5</b> in. to <b>398</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>265</b>	
					10. Screen: Manufacturer's name <b>Jess &amp; Lowell</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/gauze <b>1/8"</b> Length <b>70'</b> Set between <b>328</b> ft. and <b>398</b> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <b>yes</b> Size range of material <b>3/16"</b>	
					11. Static water level: <input type="checkbox"/> mo./day/yr. <b>210</b> ft. below land surface Date <b>6/14/76</b>	
					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 <b>50</b> + <input type="checkbox"/> g.p.m.	
					13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
					14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>12</b> inches above grade	
					15. Well grouted? <b>yes</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>4</b> ft. to <b>14</b> ft.	
					16. Nearest source of possible contamination: ft. <b>40</b> Direction <b>West</b> Type <b>old well</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Aermotor</b> Model number <b>SD12</b> HP <b>1 1/2</b> Volts <b>220</b> Length of drop pipe <b>273</b> ft. capacity <b>10</b> g.p.m. Type: <input checked="" 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>Friesen Windmill</b> <b>252</b> Business name License No. Address <b>Medie, Kansas 67864</b> Signed <b>[Signature]</b> Date <b>6-30-76</b> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5