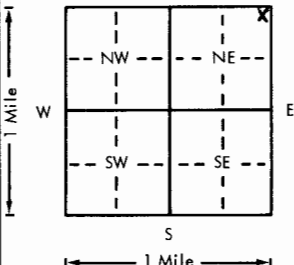


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>	Fraction <b>NE 1/4 NE 1/4 NE 1/4</b>	Section number <b>35</b>	Township number <b>T 30 S R</b>	Range number <b>36</b> <span style="float:right;">EW</span>
2. Distance and direction from nearest town or city: <b>east, 11 south from Hickok 1 mile</b>			3. Owner of well: <b>Mrs. John Teeters</b> R.R. or street: <b>218 W. Flower</b> City, state, zip code: <b>Ulysses, Ks. 67880</b>		
4. Locate with "X" in section below: N  W E S 1 Mile			Sketch map: 6. Bore hole dia. <u>0 1/4</u> in. Completion date _____ Well depth <u>260</u> ft. <u>6/29/77</u>		
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		
Surface			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 w/sand strips			9. Casing: Material <u>styrene</u> Height: Above or below Threading <u>galv</u> Surface <u>12</u> in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>220</u> depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>.320</u>		
Fine sand w/clay			10. Screen: Manufacturer's name <u>Sunflower</u> Type <u>styrene</u> Dia. <u>5"</u> Slot/gauze <u>1/16</u> Length <u>40</u> Set between <u>220</u> ft. and <u>260</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4"</u>		
Clay			11. Static water level: _____ mo./day/yr. <u>92</u> ft. below land surface Date <u>6/10/77</u>		
Sand and clay			12. Pumping level below land surfaces: <u>110</u> ft. after <u>3</u> hrs. pumping <u>5</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>10</u> g.p.m.		
Coarse sand			13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
Clay and sand strips			14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
			16. Nearest source of possible contamination: ft. _____ Direction _____ Type <u>field</u> Well disinfected upon completion? _____ Yes <input checked="" type="checkbox"/> No		
			17. Pump: <input checked="" 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		
(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>Houck Bros. Drlg. Co., Inc. 164</b> Business name <u>Box 487, Ulysses, Ks.</u> License No. _____ Address _____ Signed <u>M. Beard</u> <u>8/5/77</u> Authorized representative Date	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley					

30 36 W 35 NE NE NE

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

Form WWC-5