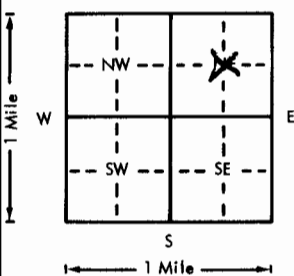


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Comanche	Fraction C NE 1/4 1/4 1/4	Section number 35	Township number T 31 S	Range number R 18 E/W
2. Distance and direction from nearest town or city: <i>5 miles East 2 miles North of Coldwater</i> Street address of well location if in city: <i>Coldwater</i>				3. Owner of well: Floyd Frank Coldwater, Kansas R.R. or street: City, state, zip code:		
4. Locate with "X" in section below: N  W E S 1 Mile Well No. 1 (TH 1-75)				6. Bore hole dia. <u>30</u> in. Completion date _____ Well depth <u>271</u> ft. <u>1/31/76</u>		
5. Type and color of material				7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary		
				8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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		
				9. Casing: Material <u>Stl</u> Height: Above _____ below _____ Threaded _____ Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP _____ PVC _____ Weight <u>3691</u> lbs./ft. Dia. <u>16</u> in. to <u>199</u> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. _____ 219		
				10. Screen: Manufacturer's name <u>Doerr</u> <u>Metal Products</u> Type <u>Stl</u> Dia. <u>16</u> " Slot/gauze <u>1/8</u> Length <u>72</u> " Set between <u>169</u> ft. and <u>185</u> ft. <u>215</u> ft. and <u>271</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/2 x 3/8</u>		
Sandy soil				From	To	11. Static water level: _____ mo./day/yr. <u>80</u> ft. below land surface Date <u>1/31/76</u>
Fine sand & clay				0	2	12. Pumping level below land surfaces: <u>No Test</u> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.
Med. to coarse sand & gravel				2	8	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No _____ Date _____
Clay				8	52	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade
Med. to coarse sand & gravel				52	90	15. Well grouted? <u>yes</u> With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete _____ Depth: From <u>0</u> ft. to <u>10</u> ft.
Clay w/some sand				90	114	16. Nearest source of possible contamination: ft. <u>1500</u> Direction <u>North</u> Type <u>Farm</u> Well disinfected upon completion? _____ Yes <input checked="" type="checkbox"/> No _____
Med. to coarse sand & med. gravel				114	165	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
Clay				165	184	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. Layne Western Co. <u>102</u> Business name _____ License No. _____ Address <u>Wichita, Kansas</u> Signed <u>[Signature]</u> Date <u>2/2/77</u> Authorized representative
Fine to coarse sand w/clay				184	215	
Med. to coarse sand & gravel				215	245	18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley
Shale - hard				245	270	
(Use a second sheet if needed)				270	271	19. Remarks:

31 S 18 W Sec 35 1/4 1/4 9/4 C NE

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

Form WWC-5