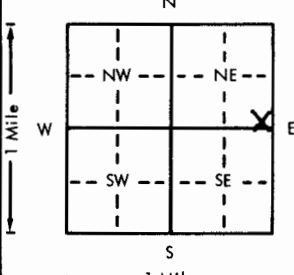


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <u>Meade</u>		Fraction <u>SE 1/4 SE 1/4 NE 1/4</u>		Section number <u>24</u>		Township number T <u>31</u> S R <u>30</u> E/W		Range number							
2. Distance and direction from nearest town or city: <u>4 1/2 mi S. 4 E 9 S of Copeland, KS.</u> Street address of well location if in city:				3. Owner of well: <u>J.J. Jenkins</u> R.R. or street: City, state, zip code: <u>Plains, KS. 67869</u>											
4. Locate with "X" in section below: N 1 Mile W E S 1 Mile				Sketch map: 		6. Bore hole dia. <u>9</u> in. Completion date _____ Well depth <u>400</u> ft. <u>8/28/76</u>									
5. Type and color of material				From		To		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							
<u>Overburden</u>				<u>0</u>		<u>180</u>		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							
<u>Coarse Sand + Clay Streaks</u>				<u>180</u>		<u>230</u>		9. Casing: Material <u>P115</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <u>5/1</u> Surface <u>14</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>340</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>0258</u>							
<u>Coarse Sand + Small gravel</u>				<u>230</u>		<u>395</u>		10. Screen: Manufacturer's name _____ <u>J+L</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>1/16</u> Length <u>60</u> Set between <u>340</u> ft. and <u>400</u> ft. _____ ft. and _____ ft. Gravel pack? <u>Yes</u> Size range of material <u>1/8"</u>							
<u>Brown Clay</u>				<u>395</u>		<u>400</u>		11. Static water level: _____ mo./day/yr. <u>180</u> ft. below land surface Date <u>8/28/76</u>							
								12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>60</u> g.p.m.							
								13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____							
								14. Well head completion: <input type="checkbox"/> Pitless adapter <u>14</u> Inches above grade							
								15. Well grouted? <u>Yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>13</u> ft.							
								16. Nearest source of possible contamination: ft. <u>500</u> Direction <u>NW</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input 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: <u>Well to be Completed by:</u> <u>Dunham Drilling</u> <u>Copeland, KS 67837</u>				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. <u>T+W Water Well 142</u> Business name License No. Address <u>Box 816 Liberal, KS 67901</u> Signed <u>CDW...</u> Date <u>8/28/76</u> Authorized representative									
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley															

T 31 R 30 W 24 Sec 24

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

Form WWC-5