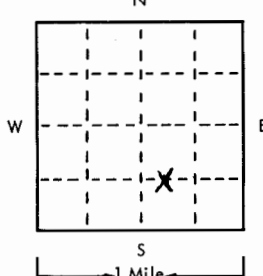


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County COMANCHE	Township name PROTECTION	Fraction CW 1/2 SE 1/4	Section number 15	Town number 32	Range number 20W
Distance and direction from nearest town or city: 3 1/2 m. north of NE CORNER, PROTECTION			3 Owner of well: WILLIAM L. DALE Address: PROTECTION, KS, 67127			
Locate with "X" in section below: 			Sketch map:			4 Well depth: 44 ft. Date of completion 4-16-76 Well diameter 9 in.
2 Type and color of material			From	To	5 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary	
			6 Use: ☐ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ☒ PASTURE			
			7 Casing: Material RMP Height: above/below Threaded ☐ Welded ☐ Surface 16 in. Diam. _____ Weight _____ lbs./ft. _____ 5 in. to 44 ft. depth Drive shoe? ☐ Yes ☐ No _____ in. to _____ ft. depth			
			8 Screen: JESS & LOWELL Manufacturer RMP Dia. 5" Type SAW Length 10' Slot/gauze 3/4 ft. and 44 ft. _____ Set between _____ Fittings: _____ Gravel pack ☒ Yes ☐ No Size range of material 5-7			
			9 Static water level: 6 ft. below land surface Date 4-16-76			
(use a second sheet if needed)			10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 8 g.p.m.		11 Water sample submitted: ☐ Yes ☐ No Date _____	
			12 Well head completion: ☐ Pitless adapter 16 inches above grade			
			13 Well grouted? ☒ Yes ☐ No ☐ Neat cement ☐ Bentonite ☒ Concrete Depth: From 0 ft. to 6 ft.			
			14 Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? ☒ Yes ☐ No			
			15 Pump: ☐ Not installed Manufacturer's name NOT KNOWN, pump jack Model number _____ HP _____ Volts _____ Length of drop pipe 20 ft. capacity _____ g.p.m. Type: ☐ Submersible ☐ Turbine ☐ Jet ☒ Reciprocating ☐ Centrifugal ☐ Other			
16 Remarks: elevation Topography: ☒ Hill ☐ Slope ☐ Upland ☐ Valley LOW RIDGE BETWEEN SLOUGHS			17 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. WYMER BLACKSMITH SHOP 228 Business name PROTECTION, KS, 67127 License by _____ Address PROTECTION, KS, 67127 Signed Kenneth Wymer Date 4-16-76 Authorized representative			

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5