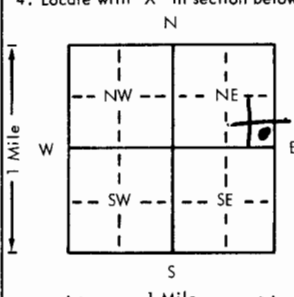


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Meade</b>	Fraction <b>SE 1/4 SE 1/4 NE 1/4</b>	Section number <b>35</b>	Township number <b>T 32 S</b>	Range number <b>R 29 E</b>
2. Distance and direction from nearest town or city: <b>4 S, 5 W, 1/2 S of Meade</b>			3. Owner of well: <b>Melvin Isaac</b> R.R. or street: City, state, zip code: <b>Meade, Kansas 67864</b>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>8 1/2</b> in. Completion date <b>4-21-80</b> Well depth <b>120</b> ft.		
				7. <input checked="" 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		
5. Type and color of material		From		To		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
top soil		0		5		9. Casing: Material <input type="checkbox"/> Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>20</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>200</b> lbs./ft. Dia. <b>5</b> in. to <b>120</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>40sch</b>
sand		6		10		10. Screen: Manufacturer's name <b>Jet Stream</b> Type <input type="checkbox"/> Dia. <b>5</b> Slot/gauze <b>7/16</b> Length <b>30</b> Set between <b>100</b> ft. and <b>120</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8 - 3/4</b>
clay + gravel		11		25		11. Static water level: <input type="checkbox"/> mo./day/yr. <b>70</b> ft. below land surface Date <b>4/21/80</b>
white clay		26		70		12. Pumping level below land surfaces: <b>70</b> ft. after <b>12</b> hrs. pumping <b>30</b> g.p.m. ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>40</b> g.p.m.
sand + gravel		71		90		13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>
big gravel		91		120		14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> 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>0</b> ft. to <b>10</b> ft.
						16. Nearest source of possible contamination: <b>None</b> ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						17. Pump: <b>See 19</b> <input type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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
						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>Bartel</b> <b>10/1A</b> Business name <b>Meade, KS</b> License No. <b>9-26</b> Address <b>Meade, KS</b> Signed <b>Bartel</b> Date <b>9-26</b> Authorized representative
18. Elevation:		19. Remarks: <b>windmill well</b>				
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