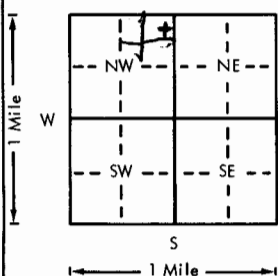


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 Barber	Fraction NE 1/4 NE 1/4 NW 1/4	Section number 10	Township number T 33 S R 15 E/W	Range number 15
2. Distance and direction from nearest town or city: 12 S Lake City Street address of well location if in city: 6 W			3. Owner of well: Velma Mills R.R. or street: Lake City Ks. City, state, zip code:			
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. 8 in. Completion date 3-17-77 Well depth 132 ft.			
			7. 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			
			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			
			9. Casing: Material <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input checked="" type="checkbox"/> RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight: 155 lbs./ft. Dia. 4 in. to 132 ft. depth Wall Thickness: inches or Dia. in. to ft. depth gage No. 173			
5. Type and color of material			From	To	10. Screen: Manufacturer's name Peerless Type slot pvc Dia. 4" Slot/gauze C35 Length 10 Set between 100 ft. and 110 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/8 in	
					11. Static water level: 70 ft. below land surface Date 3-17-77	
					12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 10 g.p.m.	
					13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____	
					14. Well head completion: 24 inches above grade <input type="checkbox"/> Pitless adapter	
					15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From _____ ft. to 10 ft.	
					16. Nearest source of possible contamination: _____ ft. Direction pasture Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: _____ Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe 90 ft. capacity 5 g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input checked="" 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. lyman nos 140 Business name License No. M1 Address Signed W H Lyman Date 4-16-77 Authorized representative		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

33
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 NE
 1/4
 NW

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

Form WWC-5