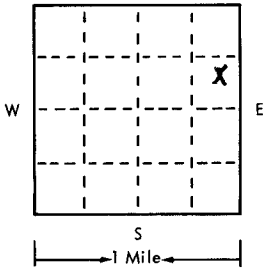


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 NE-SE-NE	Section number 18	Town number 33	Range number 20
Distance and direction from nearest town or city: FROM PROTECTION--			3 Owner of well: DARREL GIRK			
Street address of well location if in city: 2 1/2 W, 1 1/4 S			Address: PROTECTION, KANS. 67127			
Locate with "X" in section below: N  S 1 Mile			Sketch map:			4 Well depth: 81 ft. Date of completion 7-26-75 Well diameter 9 in.
			5 <input checked="" 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 type="checkbox"/> Reverse rotary			6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input checked="" type="checkbox"/> PASTURE
			7 Casing: Material RMP Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. Dia. 5 in. to 81 ft. depth Weight _____ lbs./ft. _____ Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2			Type and color of material			8 Screen: JESS + LOWELL Manufacturer JESS + LOWELL Type RMD Dia. 5 Slot/gauze SABUT Length 20 Set between 61 ft. and 81 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 4-8
			From To			9 Static water level: 62 ft. below land surface Date 7-26-75
BLACK - TOPSOIL			0 4			10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.
CLAY W- SAND + RED WASH FROM HILLS			4 62			11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____
FINE RED SAND, ALMOST A SANDSTONE			62 81			12 Well head completion: <input type="checkbox"/> Pitless adapter 30 inches above grade
						13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> CONCRETE Depth: From 20 ft. to 80 ft.
						14 Nearest source of possible contamination: NONE ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						15 Pump: <input type="checkbox"/> Not installed Manufacturer's name ARMOTOR Model number _____ HP WIND Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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
						16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley
						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 _____ License No. _____ Address PROTECTION, KS Signed WYMER Date 8-10-75 Authorized representative

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

Form WWC-5