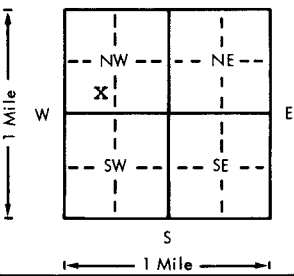


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 SW 1/4 NW 1/4</b>	Section number <b>7</b>	Township number <b>T 35 S R 27 E/W</b>	Range number
2. Distance and direction from nearest town or city: <b>18 miles south of Meade, 2 east, 1/2 south 1/2 east.</b> Street address of well location if in city:				3. Owner of well: <b>Katie Deck</b> R.R. or street: <b>c/o Don Good</b> City, state, zip code: <b>Meade, Kansas 67864</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>12</b> in. Completion date _____ Well depth <b>177</b> ft. <b>2-3-78</b>		
				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		
				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		
5. Type and color of material		From	To	9. Casing: Material <b>PVC</b> Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface <b>24</b> in. RMP _____ PVC _____ Weight <b>2.77</b> lbs./ft. Dia. <b>5</b> in. to <b>177</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>2.58</b>		
Top soil		0	5	10. Screen: Manufacturer's name _____ <b>Pumpco Cut</b>		
Fine sand		5	65	Type <b>PVC</b> Dia. <b>5"</b> Slot/gauze <b>.20</b> Length <b>20'</b> Set between <b>157</b> ft. and <b>177</b> ft. _____ ft. and _____ ft.		
Clay		65	82	Gravel pack? <b>Yes</b> Size range of material <b>1/64-5/32</b>		
Fine sand		82	89	11. Static water level: _____ mo./day/yr. <b>80</b> ft. below land surface Date <b>1-31-78</b>		
Sandy clay		89	130	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>40-50</b> g.p.m.		
Medium sand		130	150	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
Clay		150	157	14. Well head completion: <input type="checkbox"/> Pitless adapter <b>24</b> inches above grade		
Medium sand		157	178	15. Well grouted? <b>Yes</b> With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From <b>0</b> ft. to <b>10</b> ft.		
Red bed		178	180	16. Nearest source of possible contamination: <b>NONE</b> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: _____ Not installed Manufacturer's name <b>Aermotor</b> Model number <b>8 Ft. Windmill</b> Volts _____ Length of drop pipe <b>146</b> ft. capacity <b>3</b> 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. <b>Friesen Windmill</b> <b>252</b> Business name License No. <b>67864</b> Address <b>Meade, Kansas</b> Signed <b>[Signature]</b> Date <b>2-6-78</b> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

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

Form WWC-5