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

WATER WELL RECORD
KSA 82a-1201-1215

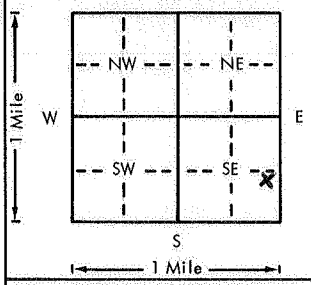
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Rooks	NE 1/4 SE 1/4 SE 1/4	17	T 8 S	R 20 E (W)

2. Distance and direction from nearest town or city: 2 miles North and 1/2 mile East of.
Street address of well location if in city: DAMAR, Ks. 67632

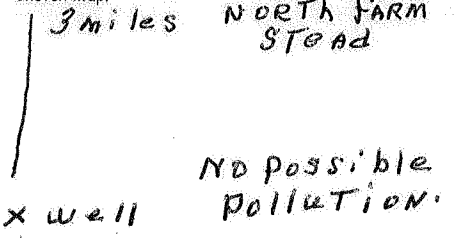
3. Owner of well: DONA ROY
R.R. or street:
City, state, zip code: DAMAR, KS. 67632

4. Locate with "X" in section below:



N
NW NE
W E
SW SE X
S
1 Mile
1 Mile

Sketch map: 3 miles North farm stead
x well
No possible pollution.



6. Bore hole dia. 9 in. Completion date 4-4-77
Well depth 15 ft.

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning X Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material PlST Height (Above) or below
Threaded ___ Welded ___ Surface 24 in.
RMP ___ PVC ___ Weight ___ lbs./ft.
Dia. 5 in. to 15 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. .250

5. Type and color of material	From	To
Clay	0	5
Broken Rock	5	10
Rock	10	11
Shale	11	15

(Use a second sheet if needed)

10. Screen: Manufacturer's name JESS AND Lowell
Type plastic Dia. 5"
(Slot)/gauze 1/16 Length 17'
Set between 5 ft. and 15 ft.
___ ft. and ___ ft.
Gravel pack? ✓ Size range of material 1/4 - 5/8

11. Static water level: mo./day/yr.
5 ft. below land surface Date 4-4-77

12. Pumping level below land surfaces: NOT pumped
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield ___ g.p.m.

13. Water sample submitted: mo./day/yr.
___ Yes ✓ No Date ___

14. Well head completion:
___ Pitless adapter ___ Inches above grade

15. Well grouted? yes
With: X Neat cement ___ Bentonite ___ Concrete
Depth: From 0 ft. to 5 ft.

16. Nearest source of possible contamination:
ft. 3 miles Direction North Type FARM
Well disinfected upon completion? X Yes ___ No

17. Pump: X Not installed
Manufacturer's name ___
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.p.m.
Type:
___ Submersible ___ Turbine
___ Jet ___ Reciprocating
___ Centrifugal ___ Other

T 8 R 20 (W) E Sec 17 NE 1/4 SE 1/4 SE 1/4

18. Elevation:

Topography:
___ Hill
___ Slope
___ Upland
X Valley

19. Remarks:
Client To Run Cement Slab To State Regulations

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.
D&L. Drilling Co 303
Business name License No.
Address Hill City, Ks 67642
Signed Allen A. Joos Date 4/8/77
Authorized representative

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

Form WWC-5

MI-1023