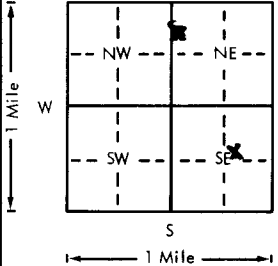


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Sheridan	Fraction NE SE SW 1/4 NE 1/4 SE 1/4	Section number 2	Township number T 9 S R 28	Range number 28
2. Distance and direction from nearest town or city: Street address of well location if in city: 3-5 1/2 E Hoxie			3. Owner of well: William Shaffer R.R. or street: City, state, zip code: Hoxie, Kansas		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: 		
5. Type and color of material			6. Bore hole dia. 9 in. Completion date 9-25-76 Well depth 90 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		
			8. Use: <input checked="" 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 plst Height: Above or below Threaded <input type="checkbox"/> Welded gl Surface 10 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 80 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 250		
			10. Screen: Manufacturer's name _____ Peerless Type PVC Dia. 5 Slot/gauze .066.06 Length 10' Set between 80 ft. and 90 ft. _____ ft. and _____ ft. Gravel pack? yes Size range of material 1/4-1/8		
			11. Static water level: _____ mo./day/yr. 12 ft. below land surface Date _____		
			12. Pumping level below land surfaces: AIR _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ 80 g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
			14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter _____ Inches above grade		
			15. Well grouted? yes With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete _____ Depth: From 4 ft. to 20 ft.		
			16. Nearest source of possible contamination: none ft. _____ Direction _____ Type _____ Well disinfected upon completion? _____ Yes <input checked="" type="checkbox"/> No		
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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		
			(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. Blue Jay Drilling Inc. 214 Business name _____ License No. _____ Address Box 503 Colby, Ks. Signed _____ Date 9/25/76 Authorized representative	
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

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

Form WWC-5

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