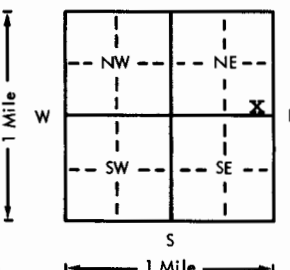


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Wyandotte	Fraction SW 1/4 SE 1/4 NE 1/4	Section number 13	Township number T 10-S	Range number S R 24 E/X
2. Distance and direction from nearest town or city: West - 5mi ±			3. Owner of well: Shawnee Const. Co.		
Street address of well location if in city:			R.R. or street: 6319 Kansas Avenue		
			City, state, zip code: Kansas City, KS 66111		
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map: 		
5. Type and color of material			6. Bore hole dia. 30 in. Completion date 5-18-77 Well depth 100 ft.		
			7. <input 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 checked="" 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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input checked="" type="checkbox"/> Other		
			9. Casing: Material Steel Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 2' above in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight 33 lbs./ft. Dia. 16 in. to 70 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. 1/4"		
			10. Screen: Manufacturer's name Doerr Type Punched Dia. 16" Slot/gauze 1/16" Length 30 Set between 70 ft. and 100 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4"		
			11. Static water level: <input type="checkbox"/> mo./day/yr. 16 ft. below land surface Date 5-18-77		
			12. Pumping level below land surfaces: 50 ft. after 10 hrs. pumping 1500 g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 1500 g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
			14. Well head completion: Temp. Dis. Head <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
			15. Well grouted? No With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <input type="checkbox"/> ft. to <input type="checkbox"/> ft.		
			16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			17. Pump: <input type="checkbox"/> Not installed Manufacturer's name Aurora Model number <input type="checkbox"/> HP 60 Volts <input type="checkbox"/> Length of drop pipe 60 ft. capacity 7000 g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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: 743 Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		19. Remarks: This is a temporary well for dewatering purpose only. Upon completion of dewatering casing and screen will be removed and remaining hole filled		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. Southern Wellpoint Co., Inc. # 23 Business name License No. Address 2935 N. Toledo, Tulsa, OK Signature A.W. Macomber Date 7-1-77 Authorized representative	

10 240 13 SW SE NE

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

A. W. Macomber, President
Form WWC-3