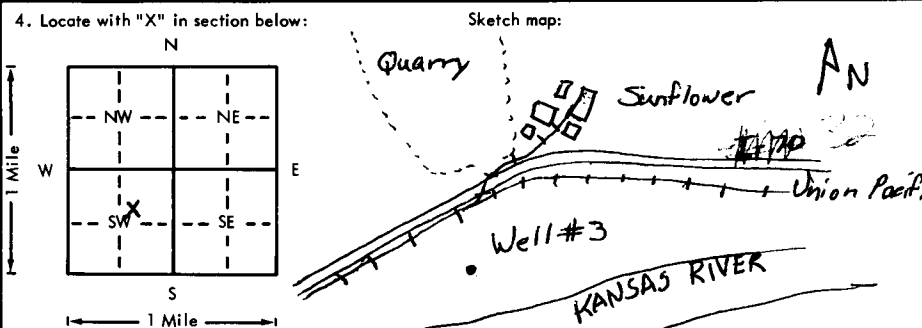


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>Wyandotte</b>	Fraction <b>SW 1/4 NE 1/4 SW 1/4</b>	Section number <b>28</b>	Township number <b>T 11 S R 23 E/N</b>	Range number
2. Distance and direction from nearest town or city: <b>2 1/2 Miles West of Edwardsville, Ks.</b>			3. Owner of well: <b>Lone Star Cement Co.</b> R.R. or street: <b>Box 297</b> City, state, zip code: <b>Bonner Springs, Ks.</b>		
4. Locate with "X" in section below: 			6. Bore hole dia. <b>18</b> in. Completion date <b>10-11-77</b> Well depth <b>85</b> ft.		
5. Type and color of material			7. Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
Topsoil			8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" 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 type="checkbox"/> Other		
Gray Silty Clay, hard			9. Casing: Material <b>Steel</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>24</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>49.56</b> lbs./ft. Dia. <b>12</b> in. to <b>65</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>0.375</b>		
Brown Sandy Silt			10. Screen: Manufacturer's name <b>Johnson</b> <b>304 Stainless</b> Type <b>Wire Wound</b> Dia. <b>17"</b> Slot/gauze <b>#60</b> Length <b>20'0"</b> Set between <b>65</b> ft. and <b>85</b> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft.		
Brown Medium to Coarse Sand			11. Static water level: <input type="checkbox"/> mo./day/yr. <b>49</b> ft. below land surface Date <b>10-10-77</b>		
Brown Sandy Silt			12. Pumping level below land surfaces: <b>56</b> ft. after <b>3</b> hrs. pumping <b>350</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>400</b> g.p.m.		
Brown Medium to Coarse Sand			13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <input type="checkbox"/>		
Brown Sandstone			14. Well head completion: <input type="checkbox"/> Pitless adapter <b>30</b> Inches above grade		
Limestone			15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>20</b> ft. below grade		
(Use a second sheet if needed)			16. Nearest source of possible contamination: ft. <b>1000</b> Direction <b>South</b> Type <b>Flood</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
18. Elevation: <b>788</b> ft.			17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Layne + Bowler</b> Model number <b>27469</b> HP <b>25</b> Volts <b>440</b> Length of drop pipe <b>50</b> ft. capacity <b>350</b> 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		
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>Layne-Western Co. Inc. 149</b> Business name License No. Address <b>1010 W 51 St K.C. Mo.</b> Signed <b>D. D. Arj</b> Date <b>12-20-78</b> Authorized representative		

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

Form WWC-5