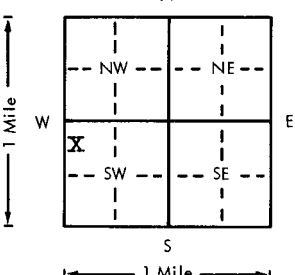


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

X Location of well:		County Harvey	Fraction 1/4 NW 1/4 SW 1/4	Section number 20	Township number T 24 S R 2E	Range number 09W
X Distance and direction from nearest town or city: 4 1/2 East of I35 off 125th North Street address of well location, if in city: and less than 2 1/2 Sedgwick Co. line North of Newton, Kansas				3. Owner of well: Sid Nattier R.R. or street: RR#1 City, state, zip code: Newton, Kansas		
4. Locate with "X" in section below: Sketch map: 				6. Bore hole dia. 11 in. Completion date 4-1-77 Well depth 60 ft.		
5. Type and color of material				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 type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input checked="" 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: Styrene Height: Above or below 11 Threaded <input type="checkbox"/> Welded 81 Surface 12 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 60 ft. depth Wall Thickness 200 inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 200		
				10. Screens: Manufacturer's name Sunflower Plastic Type Styrene Dia. 5 in. Slot/gauge .06 Length 45 Set between 15 ft. and 60 ft. Set between <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? yes Size range of material 1-1/8 in.		
				11. Static water level: <input type="checkbox"/> ft. below land surface Date 4-1-77 mo./day/yr.		
(Use a second sheet if needed)				12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.		
				13. Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date <input type="checkbox"/> mo./day/yr.		
				14. Well head completion: Capped <input type="checkbox"/> Pitless adapter 12 Inches above grade		
				15. Well grouted? yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 40 ft. to 14 ft.		
				16. Nearest source of possible contamination: NONE ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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		
				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. Harp Well & Pump 236 Business name Wichita, Kansas License No. <input type="checkbox"/> Address <input type="checkbox"/> Signed M. Arnold Date 5-19-77 Authorized representative		
				19. Remarks: No Apparent source for contamination.		