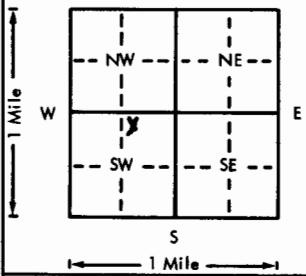


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

SW SW NESW

1. Location of well: County <u>Sedgwick</u> Fraction <u>1/4</u> <u>SW</u> <u>1/4</u> <u>SW</u> <u>1/4</u> Section number <u>20</u> Township number <u>T 26</u> Range number <u>S R 1E</u> E/W	
2. Distance and direction from nearest town or city: <u>4800 N. Armstrong</u> Street address of well location if in city: <u>Nichitas, Ks.</u> City, state, zip code: <u>Nichitas, Ks.</u>	
3. Owner of well: <u>M. E. Dotson</u>	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
<u>Sandy Soil</u>	From <u>0</u> To <u>5</u>
<u>Fine Sand</u>	<u>5</u> <u>25</u>
<u>Coarse Sand</u>	<u>25</u> <u>42</u>
6. Bore hole dia. <u>11</u> in. Completion date <u>8-15-75</u> Well depth <u>42</u> 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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
9. Casing: Material <u>PVC</u> Height Above or below <u>12</u> in. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <u>PVC</u> Weight <u>15</u> lbs./ft. Dia <u>5</u> in. to <u>42</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>42</u> ft. depth gage No. <u>214</u>	
10. Screen: Manufacture <u>Jet Stream</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>.005</u> Length <u>15'</u> Set between <u>29</u> ft. and <u>42</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4-1/8"</u>	
11. Static water level: <u>18</u> ft. below land surface Date <u>8-15-75</u> mo./day/yr.	
12. Pumping level below land surfaces: <u>18</u> ft. after <u>12</u> hrs. pumping <u>12</u> g.p.m. <u>18</u> ft. after <u>12</u> hrs. pumping <u>12</u> g.p.m. Estimated maximum yield <u>12</u> g.p.m.	
13. Water sample submitted: <u>18</u> mo./day/yr. Yes <input type="checkbox"/> No <input type="checkbox"/> Date <u>8-15-75</u>	
14. Well head completion: <u>Capped</u> Pitless adapter <u>12</u> inches above grade	
15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>42</u> ft. to <u>14</u> ft.	
16. Nearest source of possible contamination: <u>100</u> ft. Direction <u>North</u> Type <u>Septic tank</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u>Sharp Mill Pump 236</u> Model number <u>236</u> HP <u>1/2</u> Volts <u>115</u> Length of drop pipe <u>42</u> ft. capacity <u>12</u> 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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>Flat Ground</u>
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. <u>Sharp Mill Pump 236</u> Business name <u>Nichitas, Ks.</u> License No. <u>115</u> Address <u>Nichitas, Ks.</u> Signed <u>M. Arnold</u> Date <u>8-16-75</u> Authorized representative	

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

Form WWC-5