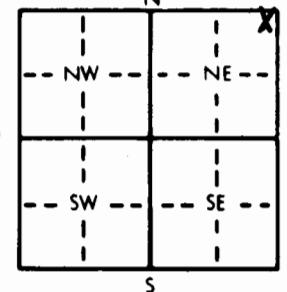


WATER WELL RECORD Form WWO-5 KSA 62a-1212			
1 LOCATION OF WATER WELL: County: BUTLER <b>008</b>	Fraction NE 1/4 NE 1/4 NE 1/4	Section Number 19	Township Number T 27 S
Range Number R 3 E <b>EW</b>			
Distance and direction from nearest town or city street address of well if located within city? 307 North Andover Road Andover, KS.			
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	Pizza Hut 307 North Andover RD. Andover, KS. 67002		
Board of Agriculture, Division of Water Resources Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL . . . . . 73 ft. ELEVATION: . . . . . Depth(s) Groundwater Encountered 1. 40 ft. 2. . . . . ft. 3. . . . . ft. WELL'S STATIC WATER LEVEL . . . . . 40 ft. below land surface measured on mo/day/yr 7-20-87 Pump test data: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm Est. Yield . . . . . gpm: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm Bore Hole Diameter . . . . . 11 in. to . . . . . ft., and . . . . . in. to . . . . . ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well		
Was a chemical/bacteriological sample submitted to Department? Yes . . . . . No <b>X</b> ; If yes, mo/day/yr sample was submitted			
Water Well Disinfected? Yes <b>X</b> No			
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 2 PVC 4 ABS	5 Wrought iron 6 Asbestos-Cement 7 Fiberglass	8 Concrete tile 9 Other (specify below) Cer-Mac styrene SDR-26	CASING JOINTS: Glued <b>X</b> Clamped . . . . . Welded . . . . . Threaded . . . . .
Blank casing diameter . . . . . 5 in. to . . . . . 40 ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.	Casing height above land surface . . . . . 12 in., weight . . . . . 1.59 lbs./ft. Wall thickness or gauge No. . . . . . 203		
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) . . . . . 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) . . . . .			
SCREEN-PERFORATED INTERVALS: From . . . . . 40 ft. to . . . . . 73 ft., From . . . . . ft. to . . . . . ft. From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.			
GRAVEL PACK INTERVALS: From . . . . . 24 ft. to . . . . . 73 ft., From . . . . . ft. to . . . . . ft. From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.			
6 GROUT MATERIAL: 1 Neat cement Grout Intervals: From . . . . . 4 ft. to . . . . . 24 ft., From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.	2 Cement grout 7 Pit privy 8 Sewage lagoon 9 Feedyard	3 Bentonite 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage	4 Other 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) None. Apparent . . . . .
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 2 Sewer lines 5 Cess pool 8 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard How many feet?			
FROM 0 3 16 34	TO 3 16 34 73	LITHOLOGIC LOG Topsoil Clay Brown Shale Gray Shale	FROM TO LITHOLOGIC LOG
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) . . . . . 7-20-87 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236 This Water Well Record was completed on (mo/day/yr) . . . . . 3-31-88 under the business name of <b>Harp Well Pump Service Inc.</b> by (signature) <b>Mary Arnold</b>			
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send ten three copies to Kansas			

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.