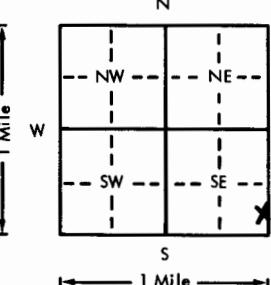


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

**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>BUTLER</b>	Fraction <b>SE 1/4 SE 1/4 SE 1/4</b>	Section number <b>30</b>	Township number <b>T 27</b>	Range number <b>3</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:	<b>1/4 mile NORTH OF HARRY STREET ON Rose Hill Road ON WEST SIDE OF STREET</b>				
3. Owner of well: R.R. or street: City, state, zip code:	<b>Lloyd BICHIMER 2114 So. CHAUTAUQUA WICHITA, KANSAS</b>				
4. Locate with "X" in section below:  	5. Type and color of material	From	To	6. Bore hole dia. _____ in. Completion date _____ Well depth <b>50</b> ft. <b>9-23-76</b>	
	<b>SANDY SOIL</b>	<b>0</b>	<b>3</b>	7. <input checked="" 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 type="checkbox"/> Reverse rotary	
	<b>SOFT GRAY SHALE</b>	<b>3</b>	<b>21</b>	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	
	<b>BLUE SHALE</b>	<b>21</b>	<b>45</b>	9. Casing: Material <b>STYRENE</b> Length: Above or below Threaded <input type="checkbox"/> Welded <b>SL</b> Surface <b>T3</b> in. RMP <b>✓</b> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>50</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gage No. <b>1200</b>	
	<b>LIMESTONE</b>	<b>45</b>	<b>50</b>	10. Screen: Manufacturer's name <b>SUNFLOWER PLASTIC</b> Type <b>STYRENE</b> Dia. <b>5"</b> Slat gage <b>106</b> Length <b>30</b> Set between <b>20</b> ft. and <b>50</b> ft. ft. and _____ ft. Gravel pack <b>YES</b> Size range of material <b>1/4 - 1/2</b>	
				11. Static water level: <b>24</b> ft. below land surface Date <b>9-23-76</b>	
				12. Pumping level below land surfaces: ft. after _____ hrs. pumping _____ g.p.m. ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
				13. Water sample submitted: _____ mo./day/yr. <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> Date _____	
				14. Well head completion: <b>12 CAPPED</b> <b>Pitless adapter</b> _____ inches above grade	
				15. Well grouted? <b>YES</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>40</b> ft. to <b>14</b> ft.	
				16. Nearest source of possible contamination: ft. _____ Direction _____ Type <b>NONE</b> Well disinfected upon completion? <b>✓</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	
				17. Pump: <b>Not installed</b> Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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:	19. Remarks: <b>FLAT GROUND SEPTIC TANK NOT INSTALLED. NO APPARENT SOURCE FOR CONTAMINATION.</b>				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	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>HARDWELL &amp; PUMP 236</b> Business name _____ License No. _____ Address <b>WICHITA, KANSAS</b> Signed <b>M. Arnold</b> Date <b>10-6-76</b> Authorized representative _____				

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

Form WWC-5