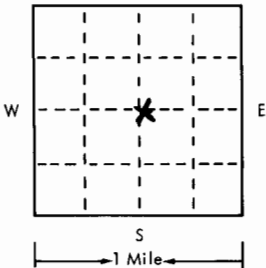


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County Butler	Township name Pleasant	Fraction C	Section number 15	Town number 28S	Range number 3 f
Distance and direction from nearest town or city: 2 miles East, of Rose Hill, Ks. on 31st So. 1/2 mile so.			3 Owner of well: Larry Brandon Address: 550 East Harmon Oklahoma City, Oklahoma			
Locate with "X" in section below: N  S 1 Mile			4 Well depth: 120 ft. Date of completion 4-28-75 Well diameter 11 in.			
2 Type and color of material			5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary			
			6 Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well			
Dirt and Top Soil			7 Casing: Material Styrene Height: above/below 12 in. Threaded ☐ Welded ☐ Surface 12 in. Diam. 2 in. to 120 ft. depth Drive shoe? ☐ Yes ☐ No 5 in. to 120 ft. depth			
			8 Screen: Manufacturer Sunflower Plastic Type Styrene Dia. 5 " Slot/gauze 005 Length 80 " Set between 40 ft. and 120 ft. Fittings: Gravel pack ☒ Yes ☐ No Size range of material 1/4-1/8"			
Blue Shale			9 Static water level: 35 ft. below land surface Date 4-28-75			
			10 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.			
			11 Water sample submitted: ☐ Yes ☐ No Date ____			
			12 Well head completion: capped ☐ Pitless adapter 12 ☒ Inches above grade			
			13 Well grouted? ☒ Yes ☐ No ☒ Neat cement ☐ Bentonite ☐ _____ Depth: From 0 ft. to 10 ft.			
			14 Nearest source of possible contamination: ft. 50 Direction West Type Septic Well disinfected upon completion? ☒ Yes ☐ No			
			15 Pump: ☒ Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. Type: ☐ Submersible ☐ Turbine ☐ Jet ☐ Reciprocating ☐ Centrifugal ☐ Other			
			16 Remarks: elevation Topography: ☐ Hill ☒ Slope ☐ Upland ☐ Valley			
(use a second sheet if needed)			17 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 _____ License No. 67209 Address Wichita, Kansas Signed M. Arnold Date 4-30-75 Authorized representative			

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WW-C-5