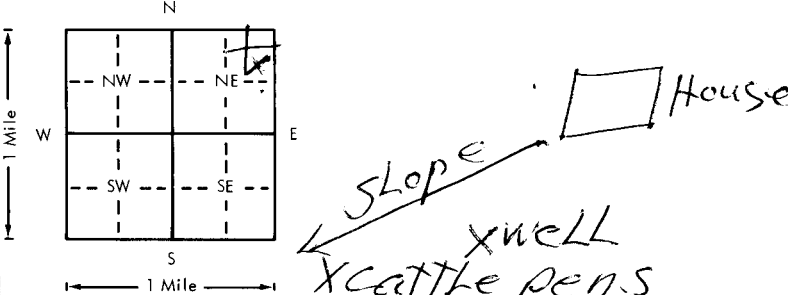


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 <u>Batter</u>	Fraction <u>SE 1/4 NE 1/4 NE 1/4</u>	Section number <u>4</u>	Township number <u>T 28 S</u>	Range number <u>R 3 E</u>
2. Distance and direction from nearest town or city: Street address of well location if in city:		<u>6N 2E</u> <u>Rose Hill</u>		3. Owner of well: <u>F.H. Land</u> R.R. or street: <u>16205 East Pawnee</u> City, state, zip code: <u>Wichita Kan 67230</u>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date <u>5/29/79</u> Well depth <u>100</u> ft.		
				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		
5. Type and color of material				8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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>PLS</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>18</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>100</u> lbs./ft. Dia. <u>5</u> in. to <u>100</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>100</u> ft. depth gage No. <u>475</u>		
				10. Screen: Manufacturer's name <u>SCN Flower</u> Type <u>100</u> Dia. <u>5</u> Slot/gauze <u>1/16</u> Length <u>30</u> Set between <u>60</u> ft. and <u>80</u> ft. Gravel pack? <u>None</u> Size range of material: _____		
				11. Static water level: _____ mo./day/yr. <u>50</u> ft. below land surface Date <u>5/20/79</u>		
				12. Pumping level below land surfaces: <u>Boiling</u> _____ ft. after <u>1</u> hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>20</u> g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
				14. Well head completion: _____ Pitless adapter _____ Inches above grade		
				15. Well grouted? <u>YES</u> With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
				16. Nearest source of possible contamination: ft. <u>100</u> Direction <u>SW</u> Type <u>pens</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 _____ 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		
18. Elevation:		19. Remarks:		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>Winter Well Drilling</u> Business name _____ License No. _____ Address <u>RR 2 Augusta Kan</u> Signed <u>Charles Winter</u> Date <u>3/14/80</u> Authorized representative		

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

Form WWC-5