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

WATER WELL RECORD
KSA 82a-1201-1215

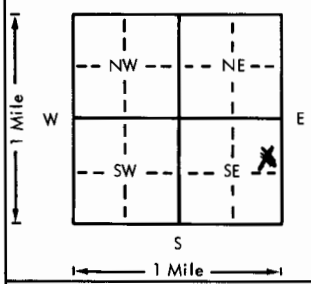
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	BUTLER	1/4 NE 1/4 SE 1/4	10	T 29 S	R 3 E W

2. Distance and direction from nearest town or city: 3 miles EAST ON ROSEHILL Road + 1 1/4 NORTH OF Douglas Road
Street address of well location if in city: ON WEST SIDE

3. Owner of well: D. E. GRIFFITTS
Owner's street: R.R. #1 BOX 36
City, state, zip code: ROSEHILL, KANSAS

4. Locate with "X" in section below: Sketch map: ROSE HILL, KS.



6. Bore hole dia. 11 in. Completion date 9-9-76
Well depth 95 ft.

7. __ Cable tool ✓ Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: ✓ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material STYRENE Height: Above or below
Threaded ___ Welded GL Surface 12 in.
RMP ✓ PVC ___ Weight ___ lbs./ft.
Dia. 5 in. to 95 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. 1200

5. Type and color of material	From	To
TOPSOIL	0	1
SAND STONE	1	2
SOAP STONE	2	4
SAND STONE	4	8
BROWN HARD SHALE	8	16
RED SHALE	16	35
BLUE SHALE	35	95
(Use a second sheet if needed)		

10. Screen: Manufacturer's name SUNFLOWER PLASTIC
Type STYRENE Dia. 5"
Slot/gauze 106 Length 45'
Set between 50 ft. and 95 ft.
___ ft. and ___ ft.
Gravel pack? YES Size range of material 1/4-1/8"

11. Static water level: 30 ft. below land surface Date 9-9-76 mo./day/yr.

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.
___ Yes ___ No Date ___

14. Well head completion: CAPPED
___ Pitless adapter 12 Inches above grade

15. Well grouted? YES
With: ___ Neat cement ___ Bentonite ✓ Concrete
Depth: From 40" ft. to 14 ft.

16. Nearest source of possible contamination: SEPTIC
ft. 90 Direction NE Type TANK
Well disinfected upon completion? ✓ Yes ___ No

17. Pump: ✓ Not installed
Manufacturer's name ___
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.p.m.
Type:
___ Submersible ___ Turbine
___ Jet ___ Reciprocating
___ Centrifugal ___ Other

18. Elevation:
Topography:
___ Hill
___ Slope
___ Upland
___ Valley

19. Remarks: FLAT GROUND

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.
Business name HARP WELL + Pump License No. 236
Address WICHITA KANSAS
Signed M. Arnold Date
Authorized representative 10-30-76

29 T — 3 R E W — 10 Sec — SE 1/4 NE 1/4 SE 1/4

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

Form WWC-5

MI-1023