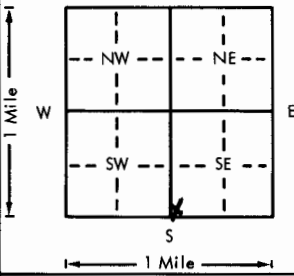


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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>SUMNER</b> <del>Butterick</del>		Fraction <b>1/4 SW 1/4 SE 1/4</b>	Section number <b>6</b>	Township number <b>T 30 S R 1E E/W</b>	Range number
2. Distance and direction from nearest town or city: <b>119th S. &amp; Meridian, Peck, Ks.</b>			3. Owner of well: <b>Norman Hendry</b> R.R. or street: <b>12002 South Meridian</b> City, state, zip code: <b>Peck, Kansas</b>		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 		6. Bore hole dia. <b>11</b> in. Completion date _____ Well depth <b>60</b> ft. <b>6-10-77</b>	
5. Type and color of material		From	To	7. <input checked="" type="checkbox"/> Cable tool <input checked="" 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	
Topsoil		0	3	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	
Clay		3	10	9. Casing: Material <b>styrene</b> Above or below Threaded _____ Welded <b>gl</b> Surface <b>12</b> in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>60</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>200</b>	
Fine Sand		10	20	10. Screen: Manufacturer's name _____ <b>Sunflower Plastic</b> Type <b>styrene</b> Dia. <b>5"</b> Slot/gauge <b>1/16</b> Length <b>20'</b> Set between <b>40</b> ft. and <b>60</b> ft. _____ ft. and _____ ft. Gravel pack? <b>yes</b> range of material <b>1/8-1/8"</b>	
Medium Sand and Clay		20	35	11. Static water level: _____ mo./day/yr. <b>18</b> ft. below land surface Date <b>6-10-77</b>	
Coarse Sand		35	60	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. <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____	
				14. Well head completion: _____ <input type="checkbox"/> Pitless adapter <b>12</b> capped _____ 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: <b>NONE</b> ft. _____ Direction _____ Type _____ 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	
		(Use a second sheet if needed)			
18. Elevation:  Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:  <b>Septic system not installed when the well was drilled.</b>  <b>No apparent source for contamination.</b>			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>Harp Well &amp; Pump 236</b> Business name <b>Wichita, Kansas</b> License No. _____ Address _____ Signed <b>M. Arnold</b> Date <b>9-2-77</b> Authorized representative	

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

Form WWC-5