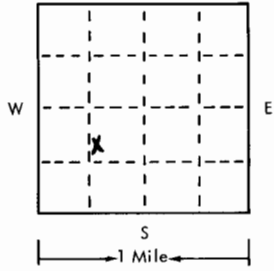


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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

WATER WELL RECORD  
KSA 82a-1201-1215

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

1 Location of well:	County <b>Sumner</b>	Township name <b>Gore</b>	Fraction <b>NE 1/4 SW 1/4</b>	Section number <b>5</b>	Town number <b>30 S</b>	Range number <b>2E</b>
Distance and direction from nearest town or city:	<b>1/2 mile SE of Mulvane, Kansas</b>		3 Owner of well: <b>Jeff Rogers</b> Address: <b>R. R. #1 Box 306 Mulvane, Kansas 67110</b>			
Locate with "X" in section below: N  W E S 1 Mile			Sketch map:		4 Well depth: <b>50</b> ft. Date of completion <b>7-4-75</b> Well diameter <b>11</b> in.	
2 Type and color of material		From	To	5 <input 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		
<b>Top Soil and Sandy Clay</b>		<b>0</b>	<b>20</b>	6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>		
<b>Clay</b>		<b>20</b>	<b>46</b>	7 Casing: Material <b>styrene</b> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. Diam. <b>5</b> in. to <b>50</b> ft. depth Weight <b>12</b> lbs./ft. <b>5</b> in. to <b>50</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Shale</b>		<b>46</b>	<b>50</b>	8 Screen: <b>Sunflower Plastic</b> Manufacturer <b>styrene</b> Dia. <b>5"</b> Slot/gauze <b>005</b> Length <b>25'</b> Set between <b>25</b> ft. and <b>50</b> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>1-1/8"</b>		
				9 Static water level: <b>20</b> ft. below land surface Date <b>7-4-75</b>		
				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: <input type="checkbox"/> Yes <input type="checkbox"/> No Date ____		
				12 Well head completion: <b>12 capped</b> <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade		
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From <b>0</b> ft. to <b>10</b> ft.		
				14 Nearest source of possible contamination: <b>Septic</b> ft. <b>100</b> Direction <b>East</b> Type <b>tank</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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		
16 Remarks: elevation  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley				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. <b>Harp Well &amp; Pump 236</b> Business name _____ License No. <b>67209</b> Address: <b>Wichita, Kansas</b> Signed: <b>M. Arnold</b> Date <b>7-7-75</b> Authorized representative		



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

Form WWC-5