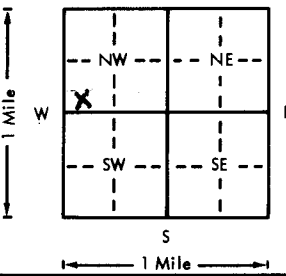


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>Cowley</u>		Fraction <u>1/4 SW 1/4 NW 1/4</u>		Section number <u>26</u>		Township number T <u>34S</u> S R <u>3</u> E <u>W</u>		Range number <u>3</u>			
2. Distance and direction from nearest town or city: <u>1 mile W of River, 1/2 N on the East side Ark City, Kansas</u>				3. Owner of well: <u>Tom Haynes Constr.</u> R.R. or street: <u>R. R. #1</u> City, state, zip code: <u>Arkansas City, Kansas</u>							
4. Locote with "X" in section below: 				6. Bore hole dia. <u>110</u> in. Completion date <u>6-25-76</u> Well depth <u>110</u> ft.		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		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		9. Casing: Material <u>STYRENE</u> Height: <u>12</u> above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>1200</u> lbs./ft. Dia. <u>5</u> in. to <u>110</u> ft. depth; Wall Thickness: inches or Dia. <u>5</u> in. to <u>110</u> ft. depth; gage No. <u>1200</u>	
5. Type and color of material				From		To		10. Screen: Manufacturer's name <u>SUNFLOWER PLASTIC</u> Type <u>STYRENE</u> Dia. <u>5"</u> Slot gauze <u>.06</u> Length <u>75'</u> Set between <u>35</u> ft. and <u>110</u> ft. Gravel pack? <u>YES</u> Size range of material <u>1/4-1/8"</u>			
<u>Sandy Soil</u>				<u>0</u>		<u>2</u>		11. Static water level: <u>35</u> ft. below land surface Date <u>6-25-76</u> mo./day/yr.			
<u>Sandy Clay</u>				<u>2</u>		<u>10</u>		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.			
<u>Fine Sand with clay streaks</u>				<u>10</u>		<u>17</u>		13. Water sample submitted: ____ mo./day/yr. Yes <input type="checkbox"/> No <input type="checkbox"/> Date ____			
<u>Blue Shale</u>				<u>17</u>		<u>110</u>		14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>12</u> inches above grade			
								15. Well grouted? <u>YES</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>40"</u> to <u>14'</u>			
								16. Nearest source of possible contamination <u>septic tank</u> ft. <u>90</u> Direction <u>NE</u> Type <u>septic tank</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
								17. Pump: Not installed Manufacturer's name <u>Hite</u> Model number <u>RPBC-2</u> HP <u>1/2</u> Volt <u>115</u> Length of drop pipe <u>90</u> ft. capacity <u>8</u> g.p.m. Type: <input checked="" 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:		19. Remarks: <u>Flat Ground</u>				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>HARP WELL &amp; Pump 236</u> Business name <u>WICHITA, KANSAS</u> License No. ____ Address <u>WICHITA, KANSAS</u> Signed <u>M. Arnold</u> Date <u>6-25-76</u> Authorized representative					

T  
R  
W  
E  
26  
SW  
1/4  
1/4  
1/4

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

Form WWC-5