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
	Barton	NW 1/4 NW 1/4 NW 1/4	36	T 17 S	R 14 E/W

2. Distance and direction from nearest town or city: 1 Mile east ½ North
Street address of well location if in city: Boyd Farm

3. Owner of well: Hushy Drilling Co.
R.R. or street: 800 Drilling
City, state, zip code: Wichita Kans.

4. Locate with "X" in section below: Sketch map:

N — W — E — S — 1 Mile — 1 Mile

X NW NE SW SE

6. Bore hole dia. 9 in. Completion date 5-22-78
Well depth 90 ft.

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

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

9. Casing: Material ____ Height: Above or below ✓
Threaded ____ Welded X Surface 1 ✓ in.
RMP ____ PVC X Weight 2.283 lbs./ft.
Dia. 5 in. to 90 ft. depth Wall Thickness: inches or
Dia. ____ in. to ____ ft. depth gage No. 200#

5. Type and color of material	From	To
Clay	0	53
Fine Sandy Clay	53	70
Gravel	70	90

(Use a second sheet if needed)

10. Screen: Manufacturer's name Shop Made
Type Saw Dia. 5"
Slot/gauze ⅛" Length 30
Set between 70 ft. and 90 ft.
____ ft. and ____ ft.
Gravel pack? ✓ Size range of material ⅛-¼

11. Static water level: mo./day/yr.
22 ft. below land surface Date 5-22-78

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:
__ Pitless adapter ____ Inches above grade

15. Well grouted? ✓
With: __ Neat cement ✓ Bentonite __ Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination:
ft. ____ Direction ____ Type ____
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: 1849

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.
Mayo Water Well Service
Business name License No.
Address Great Bend 142
Signed Charles L. Mayo 5-26-78
Authorized representative

T 17 S R 14 E/W Sec 36 1/4 NW 1/4 NW 1/4

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

Form WWC-5