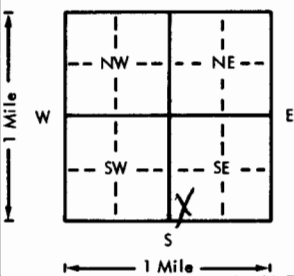


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>WICHITA</b> Fraction <b>SW 1/4 SW 1/4 SE 1/4</b> Section number <b>5</b> Township number <b>T 18 S</b> Range number <b>R 36 E/W</b>	
2. Distance and direction from nearest town or city: <b>2 mi. NORTH + 1 1/2 mi. EAST of</b> Street address of well location if in city: <b>LEDTI, KANS</b> 3. Owner of well: <b>ANTHONY BERNING</b> R.R. or street: City, state, zip code: <b>MARIETHAL, KANS. 67863</b>	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
	From To
<b>OVER BURDEN</b>	0 150
<b>SAND</b>	150 166
<b>SAND &amp; CLAY STREAKED</b>	166 176
<b>SAND</b>	176 190
<b>CLAY</b>	190 194
<b>SHALE</b>	194 196
(Use a second sheet if needed)	
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <b>CONCRETE SLAB TO BE INSTALLED BY OWNER</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>ARK VALLEY Pump &amp; Supply 123</b> Business name License No. Address <b>Box 235 Halyk, Colo.</b> Signed <b>Wm Smith</b> Date <b>2-9-75</b> Authorized representative	

6. Bore hole dia <b>2 1/2</b> in. Completion date <b>12-30-75</b> Well depth <b>196</b> ft.
7. Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary
8. Use: Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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 <b>STEEL</b> Height: <input checked="" type="checkbox"/> Above <input type="checkbox"/> below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>40</b> lbs./ft. Dia. <b>1 1/2</b> in. to <b>1 5/8</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>219</b>
10. Screen: Manufacturer's name <b>W.A. BROWN</b> Type <b>CUT SLOT</b> Dia. <b>1 1/2</b> Slot/gauze <b>SLOT</b> Length <b>40</b> " Set between <b>156</b> ft. and <b>196</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> YES Size range of material <b>5/8</b>
11. Static water level: <input type="checkbox"/> mo./day/yr. <b>160</b> ft. below land surface Date <b>12-31-75</b>
12. Pumping level below land surfaces: <b>190</b> ft. after <b>5</b> hrs. pumping <b>600</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>600</b> g.p.m.
13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date
14. Well head completion: <b>COMPLETED BY FARMER</b> <input type="checkbox"/> Pitless adapter <input type="checkbox"/> <b>FARMER</b> inches above grade
15. Well grouted? <input checked="" type="checkbox"/> YES With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.
16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <b>NONE</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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

18 360m  
R  
Sec  
1/4  
1/4  
1/4  
SUSUSE

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

Form WWC-5