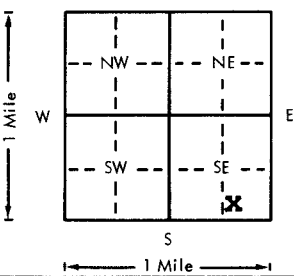


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Wichita	Fraction SW 1/4 SE 1/4	Section number 14	Township number T 18 S	Range number R 37 XW
2. Distance and direction from nearest town or city: On the North side of "J" St. just West of Jones Ave. Street address of well location if in city:				3. Owner of well: City of Leoti P. O. Box 780 City, state, zip code: Leoti, Kansas 67861		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>4 1/2</u> in. Completion date <u>11/10/77</u> Well depth <u>170</u> ft.		
		Pz No. 6-77 This Pz is located 43' West & 10' North of NW corner of Pump House No. 9		7. <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		
5. Type and color of material		From	To	8. Use: <input 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 checked="" type="checkbox"/> Other *		
Top soil		0	2	9. Casing: Material <input type="checkbox"/> Height: Above or Below <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>2</u> in. to <u>170</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>Class 160</u>		
Brown clay w/sand lenses & caliche		2	73	10. Screen: Hand Sawn <input checked="" type="checkbox"/> Hand Saw Slot Type <u>PVC</u> Dia. <u>2'</u> Slot/gauze <u>1/8"</u> Length <u>20'</u> Set between <u>150</u> ft. and <u>170</u> ft. <u>150</u> ft. and <u>170</u> ft.		
Brown clay		73	83	Gravel pack <input checked="" type="checkbox"/> Yes Size range of material <u>1/8x1/4</u>		
Fine to co. sand to med. gravel w/clay		83	121	11. Static water level: <u>118.3</u> ft. below land surface Date <u>12/20/77</u> mo./day/yr.		
Med. fine to co. sand to med. gravel		121	137	12. Pumping level below land surfaces: <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u> </u> g.p.m.		
Brown clay		137	142	13. Water sample submitted: <u> </u> mo./day/yr. <u> </u> Yes <input checked="" type="checkbox"/> No Date <u> </u>		
Fine to co. sand to med. gravel		142	146	14. Well head completion: <u> </u> Pitless adapter <u>24</u> Inches above grade		
Tan clay		146	151	15. Well grouted? <u>Yes</u> With: <u> </u> Neat cement <u> </u> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
Gray shale		151	160	16. Nearest source of possible contamination: <u>Sewer Line</u> ft. <u>250</u> Direction <u>South</u> Type <u>Line</u> Well disinfected upon completion? <u> </u> Yes <input checked="" type="checkbox"/> No		
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> g.p.m. Type: <u> </u> Submersible <u> </u> Turbine <u> </u> Jet <u> </u> Reciprocating <u> </u> Centrifugal <u> </u> Other		
				18. Elevation:		
				19. Remarks: * This Well (Pz) was constructed to obtain formation logs & to be used to monitor groundwater levels		
				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. Layne Western Co. 102 Business name <u>Wichita, Kansas</u> License No. <u> </u> Address <u> </u> Signed <u>Larry S. Knoll</u> Date <u>12/10/77</u> Authorized representative		

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

Form WWC-5