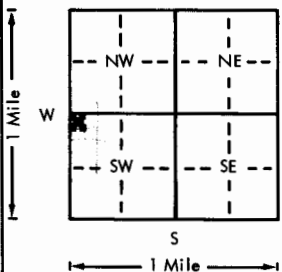


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 McPherson	Fraction NW 1/4 SW 1/4 NW 1/4 SW 1/4	Section number 6	Township number T 20 S R 3	Range number 3	X W
2. Distance and direction from nearest town or city: Southwest of City Street address of well location if in city:				3. Owner of well: City of McPherson City Building McPherson, Kansas 67460 City, state, zip code:			
4. Locate with "X" in section below:  Sketch map: Monitor Well No. 3-77				6. Bore hole dia. 8 in. Completion date 3/17/77 Well depth 225 ft.			
5. Type and color of material				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			
				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			
				9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 2.0 lbs./ft. Dia. 4 in. to 192 ft. depth Wall Thickness: inches or Dia. 4 in. to 192 ft. depth gage No. 0.237			
				10. Screen: Manufacturer's name Layne Type Slotted Dia. 4 " Slot/gauze 0.100 " Length 20 ' Set between 192 ft. and 212 ft. Gravel pack? yes Size range of material 1/8-1/4 "			
				11. Static water level: 72.0 ft. below land surface Date 3/14/77 mo./day/yr.			
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: X Yes <input type="checkbox"/> No Date 3/14/77 mo./day/yr.			
14. Well head completion: <input type="checkbox"/> Pitless adapter ____ Inches above grade				15. Well grouted? yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.			
16. Nearest source of possible contamination: ** ft. ____ Direction ____ Type ____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ 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. Elevation: 1494+- Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: ** Not determined		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 License No. Address Wichita, Kansas Signed [Signature] Date 4-5-77 Authorized representative			

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

Form WWC-5