

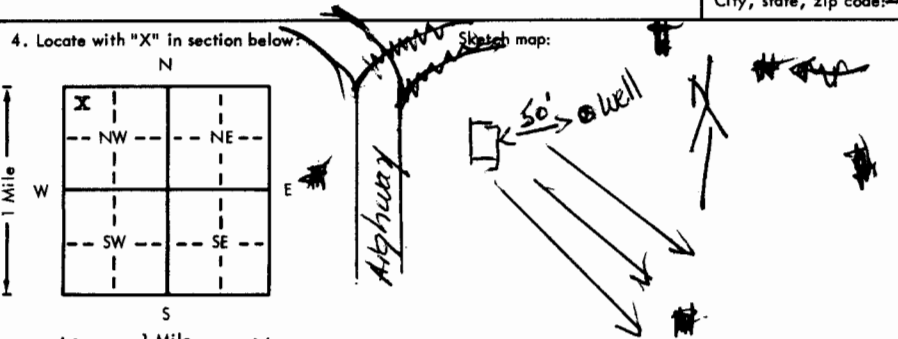
USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

LYDIA

BBB

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>NW 1/4 NW 1/4 NW</b>		Section number <b>35</b>	Township number <b>T 20 S R 36 E/W</b>	Range number <b>36</b>
2. Distance and direction from nearest town or city: <b>1 3/4 mi south, 2 mi east of Leoti</b> Street address of well location if in city:				3. Owner of well: <b>Ray Sonderegger</b> R.R. or street: <b>Rte #2</b> City, state, zip code: <b>Leoti, Ks. 67861</b>		
4. Locate with "X" in section below: 				6. Bore hole dia. <b>8 3/4"</b> Completion date <b>2/28/77</b> Well depth <b>128</b> ft.		
5. Type and color of material				7. 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		
Clay				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		
Medium sand				9. Casing: Material <b>Plisto</b> Height <b>above</b> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>2 1/2</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>5</b> in. to <b>108</b> ft. depth Wall thickness: inches or Dia. <b>1/8</b> in. to <b>108</b> ft. depth gage No. <b>Sch 40</b>		
Med. sand, little gravel				10. Screen: Manufacturer's name <b>Jesse-Lowell</b> Type <b>Plastic</b> Dia. <b>5"</b> Slot/gauze <b>1/16"</b> Length <b>20'</b> Set between <b>108</b> ft. and <b>128</b> ft. ft. and ft. Gravel pack? <b>Yes</b> Size range of material <b>3/16</b>		
Sandy clay, clay				11. Static water level: <b>108</b> ft. below land surface Date <b>1-20-77</b> mo./day/yr.		
				12. Pumping level below land surfaces: ft. after <b>0</b> hrs. pumping <b>0</b> g.p.m. ft. after <b>15</b> hrs. pumping <b>15</b> g.p.m. Estimated maximum yield <b>15</b> g.p.m.		
				13. Water sample submitted: <b>X</b> Yes <input type="checkbox"/> No Date		
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>24</b> inches above grade		
				15. Well grouted? <b>Yes</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>4</b> ft. to <b>14</b> ft.		
				16. Nearest source of possible contamination: <b>None</b> ft. Direction Type <b>None</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Pumpco</b> Model number <b>152S1011</b> HP <b>2</b> Volt <b>230</b> Length of drop pipe <b>125'</b> ft. capacity <b>13</b> 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: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: <b>BROCK 124</b> <b>3242 (TOPO)</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>High Plains Drilling &amp; Supply, Inc.</b> Business name <b>136B</b> License No. Address <b>402 N 3rd, Garden City, Ks</b> Signed <b>Arthur B. Kuhlman</b> Date <b>2/28/77</b> Authorized representative <b>3/16/77</b>		

20 360 35  
 Sec  
 #16B  
 NW 1/4 NW 1/4

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

Form WWC-5