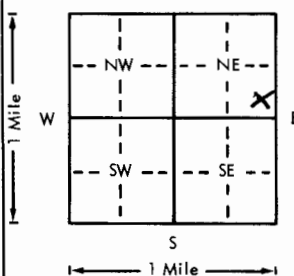


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment—Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

Harmes #5

1. Location of well: County <u>Stafford</u>		Fraction <u>SE 1/4 SE 1/4 NE 1/4</u>		Section number <u>16</u>	Township number <u>T 21 S</u>	Range number <u>R 13 W</u>
2. Distance and direction from nearest town or city: <u>10 1/2 south</u> Street address of well location if in city: <u>1 east Great Bend</u>				3. Owner of well: <u>Duke Drilling Co</u> R.R. or street: City, state, zip code: <u>Great Bend Kansas</u>		
4. Locate with "X" in section below: Sketch map: 				6. Bore hole dia. <u>5</u> in. Completion date <u>6-24-77</u> Well depth <u>60</u> 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 checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other		
From To				9. Casing: Material <u>Plastic</u> Height: <u>(Above)</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>2</u> in. to <u>60</u> ft. depth Wall Thickness: _____ inches or Dia. _____ in. to _____ ft. depth gage <u>Standard 40</u>		
				10. Screen: Manufacturer's name _____ Type <u>Self made</u> Dia. <u>2</u> Slot gauge <u>1/8</u> Length <u>10</u> Set between <u>50</u> ft. and <u>60</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>5-6</u>		
(Use a second sheet if needed)				11. Static water level: _____ mo./day/yr. <u>14</u> ft. below land surface Date <u>6-24-77</u>		
				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.		
18. Elevation: Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade		
19. Remarks:				15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
				16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
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. <u>Myers Water Well 149</u> Business name _____ License No. _____ Address <u>St Bend Ks</u> Signed <u>Q Myers</u> Date <u>6-24-77</u> Authorized representative				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		

T 21 S R 13 W E 16 Sec SE SE NE

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

Form WWC-5