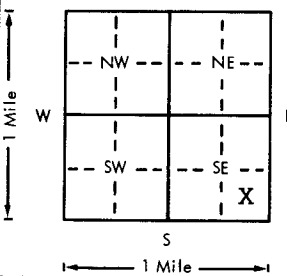


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Pawnee</b>	Fraction <b>C</b> 1/4 SE 1/4 SE 1/4	Section number <b>34</b>	Township number <b>T 21</b>	Range number <b>S R 17</b>	<b>EW</b>
2. Distance and direction from nearest town or city: <b>3 miles West of Larned, KS</b> Street address of well location if in city:			3. Owner of well: <b>Camp Pawnee</b> R.R. or street: <b>Wheat Belt Girl Scout Council</b> City, state, zip code: <b>c/o Lynett Wolfe, 113 West Sherman Hutchinson, KS 67501</b>			
4. Locate with "X" in section below: 			Sketch map: 6. Bore hole dia. <b>9</b> in. Completion date <b>5-9-78</b> Well depth <b>42</b> ft. Pump Set <b>6-2-78</b>			
5. Type and color of material			From	To	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	
Top soil			0	3	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	
Gray & blue clay			3	18	9. Casing: Material <b>Styrene</b> Height <b>Above</b> or 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>1.5</b> lbs./ft. Dia. <b>5</b> in. to <b>30</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>.200</b>	
Sand & gravel & clay streaks			18	41	10. Screen: Manufacturer's name <b>Jess &amp; Lowell</b> Type <b>Styrene 200</b> Dia. <b>5"</b> Slot/gauze <b>1/8"</b> Length <b>12'</b> Set between <b>30</b> ft. and <b>42</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack <b>yes</b> Size range of material <b>3/8-200</b>	
Dakota clay			41	42	11. Static water level: <input type="checkbox"/> mo./day/yr. <b>17</b> ft. below land surface Date <b>5-9-78</b>	
					12. Pumping level below land surfaces: <b>N/C</b> <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.	
					13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
					14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> Inches above grade	
					15. Well grouted? <b>Yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.	
					16. Nearest source of possible contamination: <b>FIELD</b> ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Berkeley Pump Co.</b> Model number <b>4BL-12</b> HP <b>3/4</b> Volts <b>230</b> Length of drop pipe <b>33</b> ft. capacity <b>15</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:	19. Remarks:		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>Clarke Well &amp; Eq., Inc.</b> <b>185</b> Business name <b>Great Bend, KS</b> License No. <b>67530</b> Address <b>6-13-</b> Signed <b>[Signature]</b> Date <b>6-13-</b> Authorized representative			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5