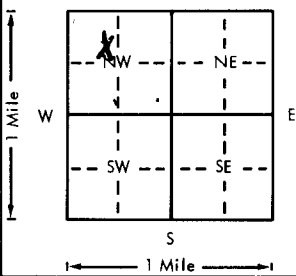


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

David Evans 34 23 S 15 W

1. Location of well: County <i>Lawrence</i> Fraction <i>NW 1/4 NE 1/4 SE 1/4</i> Section number <i>34</i> Township number <i>23 S</i> Range number <i>15 W</i>	
2. Distance and direction from nearest town or city: <i>2 North Marshall 1/2 east</i>	
3. Owner of well: <i>Drilling Co</i> R.R. or street: City, state, zip code: <i>Great Bend Kansas</i>	
4. Locate with "X" in section below: 	
5. Type and color of material	
6. Bore hole dia. _____ in. Completion date <i>3-18-78</i> Well depth <i>70</i> ft.	
7. <input checked="" 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	
9. Casing: Material _____ Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface <i>17</i> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <i>287.3</i> lbs./ft. Dia. <i>5</i> in. to <i>70</i> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. <i>200</i>	
10. Screen: Manufacturer's name <i>Ship Mide</i> Type <i>Saw</i> Dia. <i>5</i> Slot/gauge <i>8</i> Length <i>20</i> Set between <i>50</i> ft. and <i>70</i> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>1/8-1/4</i>	
11. Static water level: _____ mo./day/yr. <i>22</i> ft. below land surface Date <i>3-18-78</i>	
12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <i>150</i> g.p.m.	
13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
15. Well grouted? <input checked="" type="checkbox"/> With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete Depth: From <i>0</i> ft. to <i>10</i> ft.	
16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input 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	
(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: 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. <i>Myron White</i> Business name _____ License No. <i>142</i> Address <i>Great Bend</i> Signed <i>Charles J. Smith</i> Date <i>3-18-78</i> Authorized representative

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

Form WWC-5