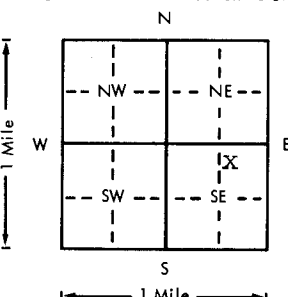


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>PW Pawnee</b>	Fraction <b>nw 1/4 ne 1/4 se 1/4</b>	Section number <b>23</b>	Township number <b>T 23 S</b>	Range number <b>R 17 E/W</b>
2. Distance and direction from nearest town or city: <b>1-S 3-W 1/2-S from Zook, Kansas</b> Street address of well location if in city:			3. Owner of well: <b>James Boyd</b> R.R. or street: <b>13 Douglas</b> City, state, zip code: <b>Wichita, Kansas 67202</b>		
4. Locate with "X" in section below: <div style="text-align: center;">  </div>			Sketch map:		
5. Type and color of material			From	To	6. Bore hole dia. <b>29</b> in. Completion date <b>5-23-79</b> Well depth <b>56 1/2</b> ft.
					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 checked="" 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
					9. Casing: Material <b>steel</b> Height: Above or <del>below</del> <b>24</b> in. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>24</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>16</b> in. to <b>56 1/2</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>7</b>
					10. Screen: Manufacturer's name <b>Cook</b> Type <b>steel</b> Dia. <input type="checkbox"/> Slot <del>size</del> <b>3/16</b> Length <b>10</b> Set between <b>46 1/2</b> ft. and <b>56 1/2</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>3/4 3/8</b>
					11. Static water level: <input type="checkbox"/> mo./day/yr. <b>20</b> ft. below land surface Date <b>3-29-79</b>
					12. Pumping level below land surfaces: <b>34</b> ft. after <b>1</b> hrs. pumping <b>200</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>500</b> g.p.m.
					13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <b>3-29-79</b>
					14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade
					15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <input type="checkbox"/> ft. to <b>10</b> ft.
		16. Nearest source of possible contamination: ft. <b>660</b> Direction <b>east</b> Type <b>oilwell</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>W.I.R.</b> Model number <b>6-10CMC</b> HP <b>30</b> Volts <b>460</b> Length of drop pipe <b>50</b> ft. capacity <b>450</b> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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: <b>2075</b> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <b>32393</b>  <b>23 17 23 ESD</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>Rosencrantz-Bemis</b> <b>134</b> Business name License No. Address <b>Great Bend, Kansas</b> <b>67530</b> Signed <b>Sandy K. Loeac</b> Date <b>6-8-79</b> Authorized representative		

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

Form WWC-5