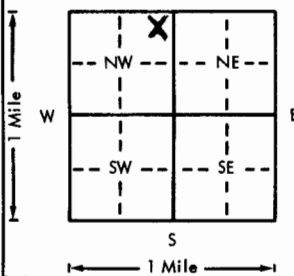
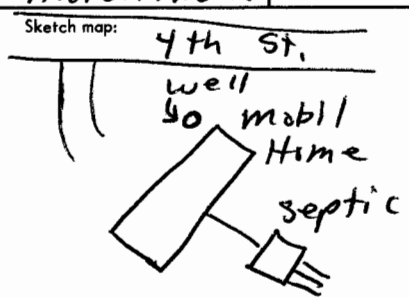


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Reno</b>	Fraction <b>NE 1/4 NE 1/4 NW 1/4</b>	Section number <b>13</b>	Township number <b>T 23 S</b>	Range number <b>R 5 E W</b>
2. Distance and direction from nearest town or city: <b>1/2 mi. W of 4th &amp; Kent Rd</b> Street address of well location if in city: <b>E. of Hutchinson</b>		3. Owner of well: <b>Steve Harper</b> R.R. or street: <b>RR #4</b> City, state, zip code: <b>Hutchinson Kan. 67501</b>				
4. Locate with "X" in section below: 		Sketch map: 		6. Bore hole dia. <b>12</b> in. Completion date <b>9-10-76</b> Well depth <b>45</b> ft.		
5. Type and color of material		From	To	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		
Sandy top soil		0	2	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		
brown sandy clay		2	8	9. Casing: Material <b>Plas</b> Height: Above or below Threaded <input type="checkbox"/> Welded <b>Glue</b> Surface <b>12</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>6</b> in. to <b>45</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>1175</b>		
fine sand		8	14	10. Screen: Manufacturer's name <b>J &amp; L</b> Type <b>RMP</b> Dia. <b>6"</b> Slot/gauze <b>1/8 hole</b> Length <b>20'</b> Set between <b>25</b> ft. and <b>45</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <b>yes</b> Size range of material <b>1/8-1/4"</b>		
brown sandy clay		14	17	11. Static water level: <input type="checkbox"/> mo./day/yr. <b>4</b> ft. below land surface Date <b>9-10-76</b>		
fine sand		17	22	12. Pumping level below land surfaces: <b>15</b> ft. after <b>2</b> hrs. pumping <b>15</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>20</b> g.p.m.		
brown sandy clay		22	33	13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/> mo./day/yr.		
fine sand		33	45	14. Well head completion: <input checked="" 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>3</b> ft. to <b>6</b> ft.		
				16. Nearest source of possible contamination: ft. <b>60</b> Direction <b>SE</b> Type <b>Septic</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: Manufacturer's name <b>STA-RITE</b> Not installed Model number <b>Ser 8</b> HP <b>3/4</b> Volts <b>230</b> Length of drop pipe <b>30</b> ft. capacity <b>18</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		
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>Price Water Well 193</b> Business name <b>RR 3 Hutchinson Kan</b> License No. <b>72477</b> Address <b>John Davenport</b> Date <b>7-24-77</b> Signed <b>John Davenport</b> Authorized representative		

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

Form WWC-5