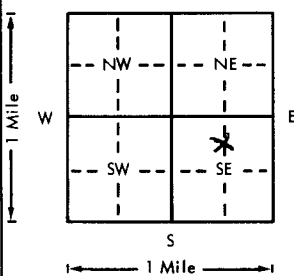


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

Meyer #1

1. Location of well: County: <i>Stafford</i> Fraction: <i>C 1/4 N 1/2 SE 1/4</i> Section number: <i>25</i> Township number: <i>T 24 S</i> Range number: <i>R 14 W E/W</i>	2. Distance and direction from nearest town or city: <i>3 1/2 miles south of St John</i> Street address of well location if in city: <i>St John</i>	3. Owner of well: <i>H. 30 Drilling Inc</i> R.R. or street: <i>Wichita Kansas</i> City, state, zip code:
4. Locate with "X" in section below: Sketch map: 		6. Bore hole dia. <i>8</i> in. Completion date <i>1-9-78</i> Well depth <i>60</i> ft.
5. Type and color of material		7. ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary
		8. Use: ☐ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☒ Oil field water ☐ Other
		9. Casing: Material <i>Plastic</i> Height: <i>Above</i> or below Threaded ☐ Welded ☒ Surface <i>1 1/2</i> in. RMP ☐ PVC ☒ Weight <i>287.3</i> lbs./ft. Dia. <i>5</i> in. to <i>60</i> ft. depth Wall Thickness: inches or Dia. ☐ in. to ☐ ft. depth gage No. <i>200</i>
		10. Screen: Manufacturer's name <i>Self-made</i> Type <i>PVC</i> Dia. <i>5</i> Slot gauge <i>8</i> Length <i>20</i> Set between <i>40</i> ft. and <i>60</i> ft. Gravel pack? <i>yes</i> Size range of material <i>1/8 - 1/4</i>
		11. Static water level: <i>17</i> ft. below land surface Date <i>1-9-78</i> mo./day/yr.
		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.
		13. Water sample submitted: ____ mo./day/yr. Yes ☐ No ☒ Date ____
		14. Well head completion: ____ Pitless adapter ____ Inches above grade
		15. Well grouted? <i>yes</i> With: ____ Neat cement ☒ 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? ____ Yes ____ No
		17. Pump: ☒ Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.p.m. Type: ____ Submersible ____ Turbine ____ Jet ____ Reciprocating ____ Centrifugal ____ Other
(Use a second sheet if needed)		
18. Elevation: Topography: ____ Hill ☒ Slope ____ Upland ____ 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>Meyer Water Well</i> Business name: <i>Wend Ko</i> License No. <i>143</i> Address: <i>Wichita</i> Signed: <i>Q Myers</i> Date: <i>1-9-78</i> Authorized representative

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

Form WWC-5