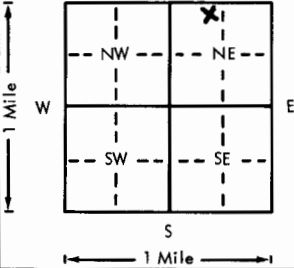


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

☒ Location of well:		County Harvey	Fraction NE 1/4 NW 1/4 NE 1/4	Section number 21	Township number T 24 S	Range number R 3W E 1W
☒ Distance and direction from nearest town or city: Street address of well location if in city: 1 North, 1/2 East of the elevator			3. Owner of well: Eugene Wolfe R.R. or street: Mt. Hope, Kansas City, state, zip code:			
4. Locate with "X" in section below: N  S 1 Mile			6. Bore hole dia. 30 in. Completion date _____ Well depth 62 ft. 5-6-77			
5. Type and color of material			7. ☐ Cable tool ☐ 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 Transite Height: Above or below _____ See #19 Welded _____ Surface 12 in. RMP _____ PVC _____ Weight 37 lbs./ft. Dia. 16 in. to 62 ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. 3/4"			
			10. Screen: Manufacturer's name _____ Johnson Type irrigator Dia. 16" Slot/gage 100 Length 25' Set between 24-44 ft. and 57-62 ft. _____ ft. and _____ ft. Gravel pack? yes Size range of material 1/4-1/8"			
			11. Static water level: _____ mo./day/yr. 7 ft. below land surface Date _____			
(Use a second sheet if needed)			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: capped ☐ Pitless adapter 12 Inches above grade			
			15. Well grouted? yes 1-2 fine sand With: ☐ Neat cement ☐ Bentonite ☒ Concrete Depth: From 0 ft. to 10 ft.			
			16. Nearest source of possible contamination: NONE ft. _____ Direction ☒ Type _____ Well disinfected upon completion? ☐ Yes ☐ No			
18. Elevation: Topography: ☐ Hill ☐ Slope ☐ Upland ☐ Valley			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			
			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. Harp Well & Pump Serv. 236 Business name _____ License No. _____ Address Wichita, Kansas 67209 Signed on Arnold Date 8-10-77 Authorized representative			
			19. Remarks: Flat Ground From #9 Banded But Joint Nor near apparent source for contamination.			