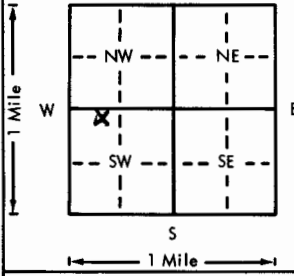


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>SW 1/4 1/4 1/4</b>	Section number <b>23</b>	Township number <b>T 24 S</b>	Range number <b>R 6 X/W</b>
2. Distance and direction from nearest town or city: <b>1 mile West 1 mile North of Darlow</b> Street address of well location if in city:			3. Owner of well: <b>C. B. Showalter</b> Haven, Kansas City, state, zip code:		
4. Locate with "X" in section below:  Sketch map: <b>Well No. 1 (TH 3-75)</b>			6. Bore hole dia. <b>30</b> in. Completion date <b>2/14/76</b> Well depth <b>42</b> ft.		
5. Type and color of material			7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary		
Soil			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		
Clay			9. Casing: Material <b>SH</b> Height: Above <input type="checkbox"/> Below <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>24</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>3691</b> lbs./ft. Dia <b>16</b> in. to <b>22</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>219</b>		
Fine to coarse sand			10. Screen: Manufacturer's name <b>Doerr</b> <b>Metal Products</b> Type <b>Stl.</b> Dia. <b>16"</b> Slot/gauze <b>1/8</b> Length <b>20'</b> Set between <b>22</b> ft. and <b>42</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8 to 3/8</b>		
Fine to coarse sand w/clay			11. Static water level: <b>11</b> ft. below land surface Date <b>2/14/76</b>		
Fine to coarse sand			12. Pumping level below land surfaces: <b>33</b> ft. after <b>3 1/2</b> hrs. pumping <b>200</b> g.p.m. ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>200</b> g.p.m.		
Clay			13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
Red and green shale			14. Well head completion: <input type="checkbox"/> Pitless adapter <b>24</b> Inches above grade		
Med. to coarse sand			15. Well grouted? <b>yes</b> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.		
Red shale			16. Nearest source of possible contamination: ft. <b>2500</b> Direction <b>SE</b> Type <b>Houses</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(Use a second sheet if needed)			17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Layne &amp; Bowler</b> Model number <b>BDR</b> HP <b>10</b> Volts <b>460</b> Length of drop pipe <b>35</b> ft. capacity <b>175</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		
18. Elevation:  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" 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. <b>Layne Western Co.</b> <b>102</b> Business name License No. Address <b>Wichita, Kansas</b> Signed <b>[Signature]</b> Date <b>3/4/76</b> Authorized representative		

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

Form WWC-5