

1. Location of well:		County: <u>Sedgewick</u> Fraction: <u>SW 1/4 NE 1/4 SE</u>	Section number: <u>19</u>	Township number: <u>T 26 S</u>	Range number: <u>R 1 E</u>																		
2. Distance and direction from nearest town or city:			3. Owner of well: <u>FRED BREWSTER</u>																				
Street address of well location if in city: <u>619 Otherton</u>			R.R. or street: <u>619 Otherton</u>																				
4. Locate with "X" in section below:			City, state, zip code: <u>Maize KS 67101</u>																				
Sketch map: N 1 Mile W E S 1 Mile Main Sewer Line house 15ft well			6. Bore hole dia. <u>11</u> in. Completion date <u>6/5/78</u> Well depth <u>50</u> ft.																				
5. Type and color of material <table border="1"><thead><tr><th></th><th>From</th><th>To</th></tr></thead><tbody><tr><td><u>Top 50'</u></td><td><u>0</u></td><td><u>2</u></td></tr><tr><td><u>Red clay</u></td><td><u>2</u></td><td><u>19</u></td></tr><tr><td><u>fine to med sand.</u></td><td><u>19</u></td><td><u>34</u></td></tr><tr><td><u>gray clay</u></td><td><u>34</u></td><td><u>35</u></td></tr><tr><td><u>gravel</u></td><td><u>35</u></td><td><u>50</u></td></tr></tbody></table>				From	To	<u>Top 50'</u>	<u>0</u>	<u>2</u>	<u>Red clay</u>	<u>2</u>	<u>19</u>	<u>fine to med sand.</u>	<u>19</u>	<u>34</u>	<u>gray clay</u>	<u>34</u>	<u>35</u>	<u>gravel</u>	<u>35</u>	<u>50</u>	7. <u>X</u> Cable tool <u>X</u> Rotary <u> </u> Driven <u> </u> Dug <u> </u> Hollow rod <u> </u> Jetted <u> </u> Bored <u> </u> Reverse rotary		
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8. Use: <u>X</u> Domestic <u> </u> Public supply <u> </u> Industry <u> </u> Irrigation <u> </u> Air conditioning <u> </u> Stock <u> </u> Lawn <u> </u> Oil field water <u> </u> Other																							
9. Casing: Material <u>Steel</u> Weight: <u>12</u> lbs./ft. Threaded <u> </u> Welded <u>X</u> Surface <u> </u> RMP <u>X</u> PVC <u> </u> Weight <u>150</u> lbs./ft. Dia. <u>5</u> in. <u>50</u> ft. depth Wall Thickness: inches <u> </u> Dia. <u> </u> in. to <u> </u> ft. depth Gauge No. <u>200</u>																							
10. Screen: Manufacturer's name <u>Smith Power</u> Type <u>200</u> Dia. <u>5</u> in. Slot/maze <u>1/16</u> Length <u>6</u> ft. Set between <u>44</u> ft. and <u>50</u> ft. <u> </u> ft. and <u> </u> ft. Gravel pack? <u>yes</u> size range of material <u>3/8</u>																							
11. Static water level: <u>20</u> ft. below land surface Date <u>6/5/78</u> <u>22</u> ft. after <u>12</u> hrs. pumping <u>20</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>60</u> g.p.m.																							
12. Pumping level below land surfaces: <u>22</u> ft. after <u>12</u> hrs. pumping <u>20</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>60</u> g.p.m.																							
13. Water sample submitted: <u> </u> mo./day/yr. <u> </u> Yes <u>X</u> No Date <u> </u>																							
14. Well head completion: <u>12</u> inches above grade <u> </u> Pitless adapter																							
15. Well grouted? <u>yes</u> With: <u> </u> Neat cement <u> </u> Bentonite <u>X</u> Concrete Depth: From <u>3</u> ft. to <u>13</u> ft.																							
16. Nearest source of possible contamination: <u>main sewer</u> ft. <u>15</u> Direction <u>No.</u> Type <u> </u> Well disinfected upon completion? <u>X</u> Yes <u> </u> No																							
17. Pump: <u>X</u> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> g.p.m. Type: <u> </u> Submersible <u> </u> Turbine <u> </u> Jet <u> </u> Reciprocating <u> </u> Centrifugal <u> </u> Other																							
18. Elevation:																							
19. Remarks: <u>customer to furnish 4x4x4" slab around casing at grade</u> <u>Per State Regulations</u> <u>Signal X</u>																							
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. <u>Whitney Dullin 318</u> Business name <u> </u> License No. <u> </u> Address <u> </u> Signed <u> </u> Date <u>6/5/78</u> Authorized representative																							

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

Farm WWC-5