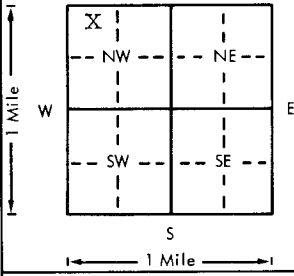


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 Kiowa	Fraction 1/4 cnw 1/4 nw 1/4	Section number 20	Township number T 27 S	Ronge number R 16W E/W
2. Distance and direction from nearest town or city: 5 n Street address of well location if in city: Haviland, Ks.			3. Owner of well: Red Tiger Drilling Co R.R. or street: 1720 Ks. St. Bldg. City, state, zip code: Wichita, Ks.			
4. Locate with "X" in section below: N  W E S 1 Mile			Sketch map:		6. Bore hole dia. 8 in. Completion date 8-26-77 Well depth 75 ft.	
5. Type and color of material			From		To	
			Top Soil-Clay		0	18
			Sandy Clay		18	35
			Sand		35	50
			Sand-Gravel		50	75
			10. Screen: Manufacturer's name Jetstream Type PVC Dia. 5" Slot/gauze 1/32 Length 20' Set between 55 ft. and 75 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/8-3/4"		9. Casing: Material _____ Height: Above XXXX Threaded _____ Welded _____ Surface 12 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight 2.8 lbs./ft. Dia. 5 in. to 75 ft. depth Wall Thickness _____ inches or Dia. _____ in. to _____ ft. depth gage No. sch 40	
			11. Static water level: 25 ft. below land surface Date 8-26-77 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 50 g.p.m.	
			13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		14. Well head completion: _____ Pitless adapter 12 Inches above grade	
			15. Well grouted? <input checked="" type="checkbox"/> With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete Depth: From 0 ft. to 10 ft.		16. Nearest source of possible contamination: oil test ft. 70 Direction se Type _____ Well disinfected upon completion? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
			17. Pump: <input checked="" type="checkbox"/> 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. Kelly's Waterwell Ser 186 Business name License No. Address R2 Great Bend, Ks. Signed Kelly Price Date 7/20/79 Authorized representative	
18. Elevation:		19. Remarks:		(Use a second sheet if needed)		
Topography: _____ Hill _____ Slope <input checked="" type="checkbox"/> Upland _____ Valley						

27
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Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5