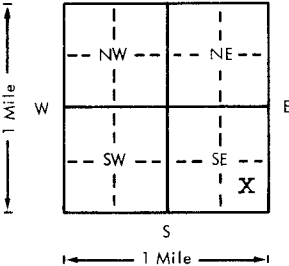


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>Kiowa</b>	Fraction <b>1/4 cse 1/4 se 1/4</b>	Section number <b>23</b>	Township number <b>T 27 S</b>	Range number <b>R 16 W E/W</b>		
2. Distance and direction from nearest town or city: Street address of well location if in city: <b>4n 1/4 W Wellsford, Ks.</b>			3. Owner of well: <b>Red Tiger Drlg Co.</b> R.R. or street: <b>1720 Ks St Bk Bldg</b> City, state, zip code: <b>Wichita, Ks. 67202</b>				
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. <b>8</b> in. Completion date <b>5-24-78</b> Well depth <b>100</b> ft.				
5. Type and color of material			7. <input type="checkbox"/> Cable tool <input checked="" 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 type="checkbox"/> Reverse rotary				
			8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other				
			9. Casing: Material <input type="checkbox"/> Height: Above <del>30</del> <del>60</del> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>2.8</b> lbs./ft. Dia. <b>5</b> in. to <b>100</b> ft. depth; Well Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth; gage No. <b>sch 40</b>				
			10. Screen: Manufacturer's name <b>Jetstream</b> Type <b>pvc</b> Dia. <b>5"</b> Slot/gauze <b>1/32"</b> Length <b>30'</b> Set between <b>70</b> ft. and <b>100</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8-3/4"</b>				
Top Soil-Clay			From	To	11. Static water level: <b>48</b> ft. below land surface Date <b>5-24-78</b> mo./day/yr.		
Sand-Clay			30	60	12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <b>70</b> g.p.m.		
Sand-Gravel			60	100	13. Water sample submitted: ____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date ____		
					14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> Inches above grade		
					15. Well grouted? <input checked="" type="checkbox"/> 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.		
					16. Nearest source of possible contamination: <b>oil test</b> ft. <b>60</b> Direction <b>S</b> Type <b>test</b> 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: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
(Use a second sheet if needed)					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>Kellys Waterwell Ser 186</b> Business name _____ License No. _____ Address <b>R2 Great Bend, Ks.</b> Signed <b>Kelly Price</b> Date <b>10-5-78</b> Authorized representative		
18. Elevation:	19. Remarks:		21. Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley				

27  
 16 W  
 23  
 CSE SE  
 1/4 1/4  
 28

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

Form WWC-5