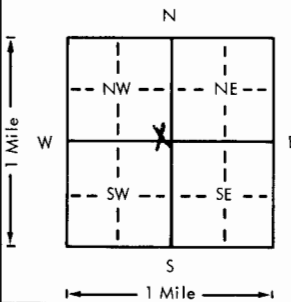


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 Kingman	Fraction 1/4 SE 1/4 NW 1/4	Section number 11	Township number T 27 S R	Range number 5W E/W
2. Distance and direction from nearest town or city: 2 1/2 miles West of Cheney and 1/2 mile South Street address of well location if in city: of 21st North. Cheney, Kansas			3. Owner of well: Mark Graf R.R. or street: Rt. #1 City, state, zip code: Cheney, Kansas		
4. Locate with "X" in section below: 			Sketch map:		
5. Type and color of material			From	To	6. Bore hole dia. 11 in. Completion date _____ Well depth 55 ft. 7-6-78
Topsoil			0	3	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
Fine sand			3	18	8. Use: <input checked="" 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 type="checkbox"/> Oil field water <input type="checkbox"/> Other
Clay			18	23	9. Casing: Material Styrene Height: Above or below _____ Threading <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. 5 in. to 55 ft. depth Wall thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. .200
Fine sand			23	40	10. Screen: Manufacturer's name _____ Sunflower plastic Type Styrene Dia. 5" Slot/gauge .06 Length 20' Set between 35 ft. and 55 ft. _____ ft. and _____ ft. Gravel pack? yes Size range of material 1/4-1/8"
Red shale			40	55	11. Static water level: _____ mo./day/yr. 15 ft. below land surface Date 7-6-78
					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. <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____
					14. Well head completion: _____ capped <input type="checkbox"/> Pitless adapter 12 Inches above grade
					15. Well grouted? yes 1-2 fine sand mix With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 40" ft. to 14 ft.
					16. Nearest source of possible contamination: ft. _____ Direction _____ Type None Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					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
18. Elevation:			19. Remarks:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			Flat ground Septic system not installed at this time. No apparent source for contamination.		
			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 236 Business name License No. Address Wichita, Kansas 67209 Signed M. Arnoldy Date 7-30-78 Authorized representative		

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

Form WWC-5

27-5011-SE NW
1/4 1/4 1/4