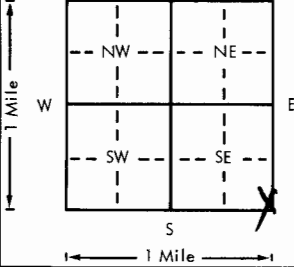


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 SE 1/4 | Section number 23 | Township number T 27 S | Range number R 5W E/W |
| 2. Distance and direction from nearest town or city: 3/4 mile North of 54 Highway, 1 mile West of Cheney Resv. Road and 1/8 North. East | | | 3. Owner of well: Ben King R.R. or street: Rt. #2 City, state, zip code: Cheney, Kansas 67025 | | |
| 4. Locate with "X" in section below: N  W E S 1 Mile 1 Mile | | | Sketch map: side of Road. Cheney, Kansas | | |
| 5. Type and color of material | | | From | To | 6. Bore hole dia. <u>11</u> in. Completion date _____ Well depth <u>65</u> ft. <u>7-25-78</u> |
| Topsoil | | | 0 | 3 | 7. <input checked="" 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 | 40 | 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 |
| Red shale | | | 40 | 65 | 9. Casing: Material <u>Styrene</u> Height: Above or below _____ Threaded _____ Welded <u>gl</u> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>65</u> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. <u>200</u> |
| | | | | | 10. Screen: Manufacturer's name <u>Sunflower Plastic</u> Type <u>styrene</u> Dia. <u>5"</u> Slot/gauge <u>.06</u> Length <u>27'</u> Set between <u>38</u> ft. and <u>65</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>1/4-1/8"</u> |
| | | | | | 11. Static water level: _____ mo./day/yr. <u>20</u> ft. below land surface Date <u>7-25-78</u> |
| | | | | | 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: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade <u>capped</u> |
| | | | | | 15. Well grouted? <u>yes 1-2 fine sand mix</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>40'</u> ft. to <u>14</u> ft. |
| | | | | | 16. Nearest source of possible contamination: ft. _____ Direction _____ Type <u>None</u> 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 |
| | | | (Use a second sheet if needed) | | |
| 18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | 19. Remarks: 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 <u>M. Arnold</u> Date <u>7-25-78</u> Authorized representative | | |

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

Form WWC-5