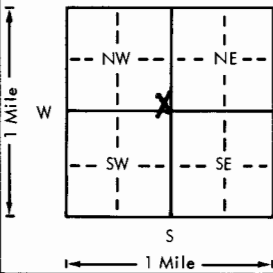


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <i>Hingman</i>	Fraction <i>1/4 SE 1/4 NW 1/4</i>	Section number <i>24</i>	Township number T <i>275</i> S	Range number R <i>5</i> E <i>0</i>
2. Distance and direction from nearest town or city:	Street address of well location if in city:		3. Owner of well:		
<i>1/2 North of</i>	<i>54 Highway and</i>		<i>Gess Maus</i> R.R. or street: <i>35 200 West Central</i> City, state, zip code: <i>Cheney, Kansas</i>		
4. Locate with "X" in section below:	Sketch map: <i>1/2 West on the North side of road Cheney, Kansas</i>		6. Bore hole dia. <i>1 1/2</i> in. Completion date Well depth <i>116</i> ft. <i>7-2-76</i>		
			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		
5. Type and color of material	From	To	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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
<i>Sandy Soil</i>	<i>0</i>	<i>2</i>	9. Casing: Material <i>STYRENE</i> Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <i>12</i> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <i>5</i> in. to <i>116</i> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. <i>1200</i>		
<i>Fine Sand</i>	<i>2</i>	<i>30</i>	10. Screen: Manufacturer's name <i>SUNFLOWER PLASTIC</i> Type <i>STYRENE</i> Dia. <i>5"</i> Slot/gauze <i>106</i> Length <i>60-ft</i> Set between <i>56</i> ft. and <i>116</i> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> YES Size range of material <i>14-18"</i>		
<i>Red Shale</i>	<i>30</i>	<i>116</i>	11. Static water level: _____ mo./day/yr. <i>60</i> ft. below land surface Date <i>7-2-76</i>		
			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 <i>12</i> inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> YES With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <i>70"</i> to <i>14</i> ft.		
			16. Nearest source of possible contamination: <i>Septic Tank</i> ft. <i>300</i> Direction <i>West</i> Type _____ 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:	19. Remarks:		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. <i>HARP Well + Pump 236</i> Business name _____ License No. _____ Address <i>WICHITA, KANSAS</i> Signed <i>M. Arnold</i> Date <i>8-13-76</i> Authorized representative		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 27
 R 5
 E 0
 Sec 24
 1/4 1/4 1/4

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

Form WWC-5