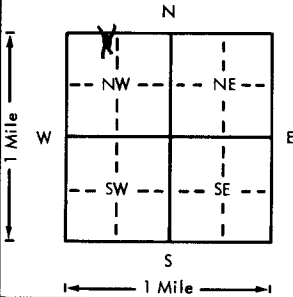


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <u>kiowa</u> Fraction <u>NE 1/4 NW 1/4 NW 1/4</u> Section number <u>32</u> Township number <u>T 28-101 S</u> Range number <u>R 16</u> (EW)			
2. Distance and direction from nearest town or city: <u>3.5, Haviland Kansas</u> Street address of well location if in city:		3. Owner of well: <u>FERN KESINGER</u> R.R. or street: City, state, zip code: <u>Haviland Kansas</u>	
4. Locate with "X" in section below: Sketch map: 		6. Bore hole dia. <u>8 3/4</u> in. Completion date <u>4-13-78</u> Well depth <u>134</u> ft.	
5. Type and color of material		7. <input type="checkbox"/> Coble tool <input type="checkbox"/> Rotary <input checked="" 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 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	
		9. Casing: Material <u>PI</u> Height: Above or below Threaded <input type="checkbox"/> Welded <u>GI</u> Surface <u>12</u> in. RMP <u>Y</u> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>134</u> ft. depth Wall Thickness _____ inches or Dia. _____ in. to _____ ft. depth gage No. <u>200</u>	
		10. Screen: Manufacturer's name <u>Santflower Plastics</u> Type <u>RMP</u> Dia. <u>5"</u> Slot/gauze <u>1/8</u> Length <u>20</u> Set between <u>114</u> ft. and <u>134</u> ft. Gravel pack? <u>YES</u> Size range of material <u>5x5</u>	
		11. Static water level: _____ mo./day/yr. <u>82</u> ft. below land surface Date _____	
		12. Pumping level below land surfaces: <u>82</u> ft. after <u>1</u> hrs. pumping <u>10</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>25</u> g.p.m.	
		13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
		14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>12</u> Inches above grade	
		15. Well cased? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>14</u> ft.	
		16. Nearest source of possible contamination: ft. <u>50</u> Direction <u>N</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		17. Pump: <u>Not installed</u> Manufacturer's name <u>Flint + Walling</u> Model number <u>7B412</u> HP <u>3/4</u> Volts <u>230</u> Length of drop pipe <u>10.5</u> ft. capacity <u>10</u> g.p.m. Type: <input checked="" 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. CARL HAYSE WATER WELL SERV. 224 Business name _____ License No. _____ Address <u>603 S. Maple, Greensburg, Kans.</u> Signed <u>Carl Hayse</u> Date <u>4-13-78</u> Authorized representative	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley			

T 28-101 S R 16 NE NW NW

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

Form WWC-5