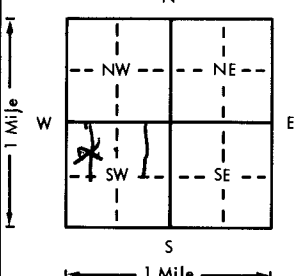


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment—Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

Fromme #1

1. Location of well: County <u>Kiowa</u>		Fraction <u>C NW SW</u> <small>1/4 1/4 1/4</small>		Section number <u>5</u>	Township number <u>T 28 S</u>	Range number <u>S R 20 W</u> <small>E/W</small>
2. Distance and direction from nearest town or city: <u>3 north</u> <u>2 1/2 west</u> <u>Mullenville</u>				3. Owner of well: <u>Search Drilling Co</u> R.R. or street: <u>Michita Kansas</u> City, state, zip code: <u>Michita Kansas</u>		
4. Locate with "X" in section below: Sketch map: 				6. Bore hole dia. <u>8</u> in. Completion date <u>6-14-77</u> Well depth <u>105</u> ft.		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				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 <u>Plastic</u> Height: <input checked="" type="checkbox"/> Above <input type="checkbox"/> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>287.3</u> lbs./ft. Dia. <u>5</u> in. to <u>105</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>105</u> ft. depth gage No. <u>200</u>		
				10. Screens: Manufacturer's name <u>Self made</u> Type <u>PVC</u> Dia. <u>5</u> Cloth/gauze <u>8</u> Length <u>20</u> Set between <u>85</u> ft. and <u>105</u> ft. ft. and <u>105</u> ft. Gravel pack? <u>yes</u> Size range of material <u>3-4</u>		
				11. Static water level: <u>50</u> ft. below land surface Date <u>6-14-77</u> <small>mo./day/yr.</small>		
				12. Pumping level below land surfaces: <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u> </u> g.p.m.		
				13. Water sample submitted: <u> </u> ma./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>		
				14. Well head completion: <input type="checkbox"/> Pitless adapter <u> </u> inches above grade		
				15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
				16. Nearest source of possible contamination: ft. <u> </u> Direction <u> </u> Type <u> </u> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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. <u>Myers Water Well</u> Business name <u>St Bend Ks 143</u> License by <u> </u> Address <u> </u> Signed <u>R Myers</u> Date <u>6-14-77</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 28 S R 20 W E 5 C 14350

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

Form WWC-5