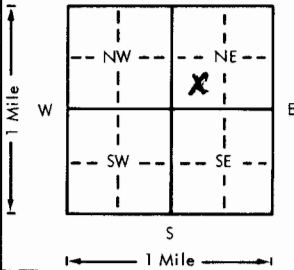


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 <b>Pratt</b>	Fraction <b>1/4 CSW NE 1/4</b>	Section number <b>33</b>	Township number <b>T 29 S R 13 E</b>	Range number <b>13 E</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:	<b>3 W. 1 1/2 S Sawyer, KS</b>		3. Owner of well: R.R. or street: City, state, zip code:	<b>Gabbert-Jones Inc 830 Sutton Pl. Wichita, KS 67202</b>	
4. Locate with "X" in section below: Sketch map:			6. Bore hole dia. <b>8</b> in. Completion date <b>7-19-77</b> Well depth <b>147</b> ft.		
5. Type and color of material			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		
			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 <input type="checkbox"/> Height: Above <input type="checkbox"/> below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>5</b> in. to <b>147</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>SCH 40</b>		
			10. Screen: Manufacturer's name <b>MPI</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/gauze <b>1/16"</b> Length <b>40'</b> Set between <b>107</b> ft. and <b>147</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8-3/4"</b>		
			11. Static water level: <b>60</b> ft. below land surface Date <b>7-19-77</b> mo./day/yr.		
(Use a second sheet if needed)			12. Pumping level below land surfaces: ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>70</b> g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
			14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>12</b> ft.		
			16. Nearest source of possible contamination: <b>oil</b> ft. <b>50</b> Direction <b>S</b> Type <b>Test</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(Use a second sheet if needed)			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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:		
			20. Water well contractor's certification: This well was drilled under my jurisdiction and this record is true to the best of my knowledge and belief. <b>186</b> <b>Kellys Water Well Ser</b> Business name <b>K2 Great Bend KS</b> License No. <b>186</b> Address <b>Kelly Price</b> Date <b>8-11-78</b> Signed <b>Kelly Price</b> Authorized representative		
			Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		

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

Form WWC-5