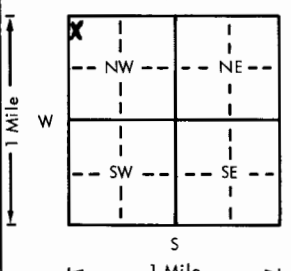


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Sumner	Fraction NW 1/4 NW 1/4 NW 1/4	Section number 24	Township number T 32 S	Range number R 3W E/W
2. Distance and direction from nearest town or city: Street address of well location if in city 3 1/4 West of Mayfield, Kansas on the North Side of the Road			3. Owner of well: R.R. or street: City, state, zip code: Triple R Farms R. R. #3 Wellington, Kansas		
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. 11 in. Completion date _____ Well depth 60 ft. 1-3-77		
5. Type and color of material			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		
			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 styrene Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 60 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. .200		
			10. Screen: Manufacturer's name Sunflower Plastic Type styrene Dia. 5" Slot/groove .06 Length 40 Set between 20 ft. and 60 ft. Gravel pack? yes Size range of material 1/8"		
			11. Static water level: _____ mo./day/yr. 17 ft. below land surface Date 1-3-77		
(Use a second sheet if needed)			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: 12 capped <input type="checkbox"/> Pitless adapter _____ inches above grade		
			15. Well grouted? yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 40" ft. to 14 ft.		
			16. Nearest source of possible contamination: Septic ft. 60 Direction NW Type Tank Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(Use a second sheet if needed)			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		
			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 Wichita, Kansas License No. _____ Address _____ Signed T. Arnold Date 5-20-77 Authorized representative		
			18. Elevation:		
			19. Remarks: Flat Ground		
			Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		

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

Form WWC-5