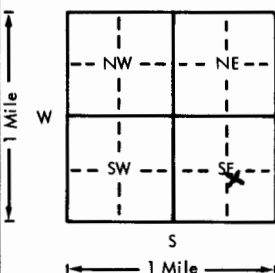


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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>Seward</b>	Fraction <b>NW 1/4 SE 1/4 SE 1/4</b>	Section number <b>28</b>	Township number <b>T 33 S R 31 E/W</b>	Range number <b>31</b>
2. Distance and direction from nearest town or city: <b>S 8 1/4 mi. W of Kismet, Kansas.</b> Street address of well location if in city:				3. Owner of well: <b>A. J. Handy</b> R.R. or street: <b>R. R.</b> City, state, zip code: <b>Kismet, Kansas</b>		
4. Locate with "X" in section below: N  W E S 1 Mile Center of the SE 1/4, Sec. 28, T33S, R31W, Seward County, Kansas.				6. Bore hole dia. <b>28</b> in. Completion date <b>8/27/76</b> Well depth <b>410</b> ft.		
5. Type and color of material				From	To	7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary
						8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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 <b>stl</b> Height: <u>Above or below</u> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>37</b> lbs./ft. Dia. <b>16</b> in. to <b>189</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>219</b>
						10. Screen: Manufacturer's name <b>Doerr, Foster</b> Type <b>milslot louver</b> <b>16"</b> Slot/gauze <b>1/8"</b> Length <b>221'</b> Set between <b>189</b> ft. and <b>410</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <b>yes</b> Size range of material <b>2.5mm</b>
						11. Static water level: <input type="checkbox"/> mo./day/yr. <b>180</b> ft. below land surface Date <b>7/7/76</b>
						12. Pumping level below land surfaces: <b>200</b> ft. after <b>1/2</b> hrs. pumping <b>1040</b> g.p.m. <b>226</b> ft. after <b>1</b> hrs. pumping <b>1753</b> g.p.m. Estimated maximum yield <b>2000</b> g.p.m.
						13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <input type="checkbox"/>
				14. Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade		
				15. Well grouted? <b>yes</b> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.		
				16. Nearest source of possible contamination: <b>unk.</b> ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Layne &amp; Bowler</b> Model number <b>12 KM</b> HP <b>125</b> Volts <input type="checkbox"/> Length of drop pipe: <b>280</b> ft. capacity <b>900</b> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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. <b>Layne-Western Co., Inc. 102</b> Business name License No. Address <b>Garden City, Kansas</b> Signed <b>[Signature]</b> Date <b>18 Nov 76</b> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 33 S 31 W Sec 28 NW 1/4 SE

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

Form WWC-5