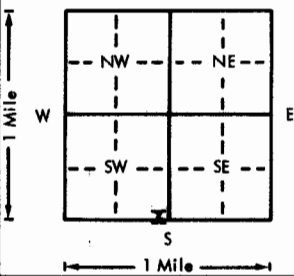


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Gomanche	Fraction SE 1/4 SE 1/4 SW 1/4	Section number 24	Township number T 34 S R 30W E/W	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city: Nine m. s., 1 1/2 E of Protection, Ks.			3. Owner of well: Mrs. Pluma Waters R.R. or street: 5645 Park Hollow Drive, City, state, zip code: Wichita, Ks. 67208		
4. Locate with "X" in section below: Sketch map: 			Well is close to road in wheat field.		
5. Type and color of material			From	To	6. Bore hole dia. 8 1/2 in. Completion date 12-21-78 Well depth 50 ft.
top soil			0	2	7. <input checked="" 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 type="checkbox"/> Reverse rotary
soft clay, reddish			2	8	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 checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
clay, black			8	18	9. Casing: Material RMP Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 14 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. _____ in. to 30 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. 250
soft clay, lt. tan			10	24	10. Screen: Manufacturer's name Jess & Lowell Type RMP Dia. 5 Slot/gauze 3/8" cut Length 10 ft. Set between 20 ft. and 30 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material 1/16-3/4"
clayey gravel			24	30	11. Static water level: _____ mo./day/yr. 17 ft. below land surface Date 12-21-78
					12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 8 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 type="checkbox"/> Pitless adapter 14 inches above grade
					15. Well grouted? <input checked="" type="checkbox"/> Yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 10 ft. to top ft.
					16. Nearest source of possible contamination: None ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					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
					(Use a second sheet if needed)
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: Iron pipe size 65/8 O. d. set in concrete to protect casing and hold pump end jack Water is too hard for domestic use. Very near level		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. Wynar Blacksmith Shop 228 Business name _____ License No. _____ Address Protection, Ks. 67127 Signed Wynar Blacksmith Date 12-22-78 Authorized representative		

34 200 24 SE SE SW
T R Sec 1/4 1/4 1/4

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

Form WWC-5