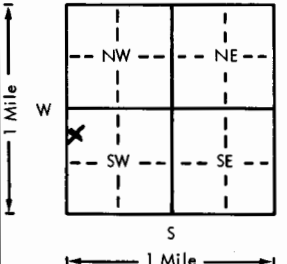
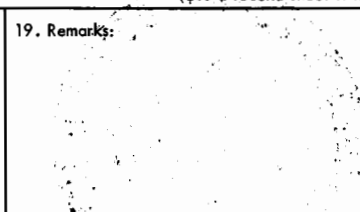


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Seward	Fraction W 1/4 NW 1/4 SW 1/4	Section number 12	Township number T 34 S	Range number R 33 EW
2. Distance and direction from nearest town or city: Approximately 2 3/4 Miles NE of Liberal, Kansas. Street address of well location if in city:			3. Owner of well: Eugene McAhren R.R. or street: Liberal, Kansas 67901 City, state, zip code:		
4. Locate with "X" in section below: N  W E S 1 Mile			6. Bore hole dia. 26 in. Completion date _____ Well depth 293 ft. 9/6/78		
5. Type and color of material See Attachment			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 Steel Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight 36.91 lbs./ft. Dia. 16 in. to 293 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. .219		
			10. Screen: Manufacturer's name _____ Johnson Screen Type Continuous Dia. 16" Slot/gauze .100 Length 50' Set between 230 ft. and 250 ft. 255'-265' ft. and 270'-290' ft. Gravel pack? Yes Size range of material #1 Coarse		
			11. Static water level: _____ mo./day/yr. 208 ft. below land surface Date 9/11/78		
			12. Pumping level below land surfaces: 271 ft. after _____ hrs. pumping 1335 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 1,300 g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
			14. Well head completion: <input type="checkbox"/> Pitless adapter 12 Inches above grade		
			15. Well grouted? Yes With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
			16. Nearest source of possible contamination: None ft. _____ Direction _____ Type Observed Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" 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: x Flat Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	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. Henkle Drilling & Sply 145 Business name License No. _____ Address: Box 639, Garden City, Ks Signed [Signature] Date 9/12/78 Authorized representative		

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

Form WWC-5

