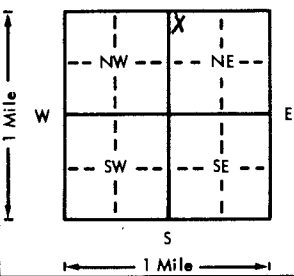


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

AB3

| | | | | | | |
|---|--|-------------------------|---|-----------------------------|---|-------------------------------|
| 1. Location of well: | | County Thomas | Fraction NW 1/4 NW 1/4 NE 1/4 | Section number 14 | Township number T 7 S | Range number R 31 W |
| 2. Distance and direction from nearest town or city: 1 mile south Street address of well location if in city: Rexford, Ks. | | | 3. Owner of well: Murfin Drilling Co R.R. or street: City, state, zip code: Wichita, Ks. | | | |
| 4. Locate with "X" in section below: <div style="text-align: center;">  </div> | | | Sketch map: | | 6. Bore hole dia. 3 in. Completion date 2-1-78 Well depth 200 ft. | |
| 5. Type and color of material | | | From | To | 7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input checked="" 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 PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 24 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 200 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 226 | |
| | | | | | 10. Screen: Manufacturer's name Jet Stream Type PVC Dia. 5" Slot gauge .031 Length 20' Set between 182 ft. and 200 ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 12-16 | |
| | | | | | 11. Static water level: <input type="checkbox"/> mo./day/yr. 110 ft. below land surface Date 2-1-78 | |
| | | | | | 12. Pumping level below land surfaces: 120 ft. after 2 hrs. pumping 100 g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 100 g.p.m. | |
| | | | | | 13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <input type="checkbox"/> | |
| | | | | | 14. Well head completion: <input type="checkbox"/> Pitless adapter 24 inches above grade | |
| | | | | | 15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft. | |
| | | | | | 16. Nearest source of possible contamination: Oil well ft. 500' Direction S Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| | | | | | 17. Pump: <input type="checkbox"/> Not installed Manufacturer's name Fairbanks Model number 4K HP 5 Volts 220 Length of drop pipe 130 ft. capacity 100 g.p.m. Type: <input checked="" 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. Kent Water Well Serv. Business name E Neway 40 License No. 199 Address 116 Kent Date 2-1-78 Signed Authorized representative | | | |
| | | | 18. Elevation: | | | |
| | | | 19. Remarks: | | | |
| | | | (Use a second sheet if needed) | | | |

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

Form WWC-5

7 31 W 14
 Sec 14
 1/4 1/4 1/4
 NW 1/4 NE 1/4