

of drinking water supply in the scarcity areas of that State, particularly the border areas and Lunkaransar area in Bikaner District.

(b) It was observed that the water supply position in some of the areas was really very difficult.

(c) and (d). The following Rural Water Supply Schemes of Bikaner District have been approved during 1964 for implementation under the National Water Supply and Sanitation Programme under which 50 per cent grant-in-aid is given by the Centre:—

Name of the Scheme and Estimated cost.

1. Sinthal Water Supply Scheme, Rs. 1.68 lakhs
2. Kalu Water Supply Scheme, Rs. 1.62 lakhs
3. Kakra Water Supply Scheme, Rs. 1.13 lakhs
4. Chattargarh Water Supply Scheme, Rs. 0.21 lakhs
5. Surapura Water Supply Scheme, Rs. 1.00 lakhs.

A preliminary report on the composite water supply scheme covering the rural and urban areas in Bikaner District has been received recently from the State Government. The feasibility of the proposal is under scrutiny.

The Centre has agreed to provide additional assistance to the State Government to the extent of Rs. 63 lakhs for rural water supply schemes in Rajasthan.

Widening of Road Near Safdarjang

1683-A. Shri Yashpal Singh: Will the Minister of Health be pleased to state:

(a) whether her attention has been drawn to the inordinate delay in the completion of work on the widening of road connecting the Safdarjang Madarsa and Safdarjang Hospital, New Delhi; and

(b) if so, the action taken to accelerate the work?

The Minister of Health (Dr. Sushila Nayar): (a) The New Delhi Municipal Committee have reported that the delay in the completion of this work has been caused by such factors as—

- (i) shifting of sub-stations, staff quarters and tube-wells etc.
- (ii) difficulty in acquiring the required additional land.

The matter is being pursued by the Committee with the various authorities concerned and it is hoped that the work of widening the road would be completed by December, 1964.

12.28 hrs.

POINT OF ORDER

Dr. L. M. Singhvi (Jodhpur): Mr. Speaker, at this stage, I think I should be permitted to raise my point of order which relates to Short Notice Question No. 11.

Mr. Speaker: I am allowing him to raise it but then I should make it clear that simply because a Member has written to me that does not give him the right to raise that point. He should just ascertain whether I have given that consent or not.

Dr. L. M. Singhvi: How should I ascertain, Sir? I thought that this was the proper time to raise it.

Mr. Speaker: Therefore, he should stand up? It is not fair.

Dr. L. M. Singhvi: I am raising this point of order with your leave. I do so as a very painful duty. A Short Notice Question No. 11, relating to the medical treatment to the late Prime Minister, its sufficiency and appropriateness was admitted by you and the hon. Minister was notified and the Minister expressed her willingness and readiness and preparedness to answer that question. We were informed that the question will be called today after Short Notice Question No. 10. Now, we are being informed that the question is being withdrawn from the list. I would