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

WATER WELL RECORD
KSA 82a-1201-1215

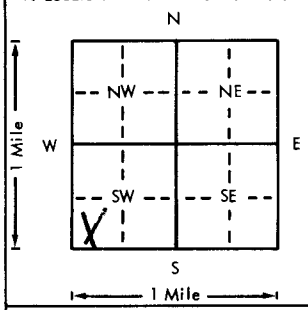
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Geary	SW 1/4 SW 1/4 SW 1/4	1	T 12 S	R 4 E/W

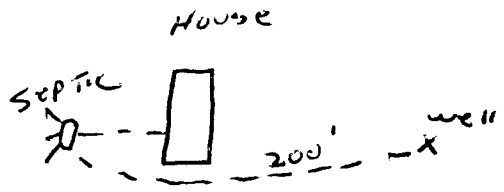
2. Distance and direction from nearest town or city: 7 W OF
Street address of well location if in city: JUNCTION CITY

3. Owner of well: Richard Rothfus
R.R. or street: 1012 Highland
City, state, zip code: JUNCTION CITY, Ks

4. Locate with "X" in section below:



Sketch map:



6. Bore hole dia. 8 in. Completion date ____
Well depth 140 ft. 7-12-77

7. __ Cable tool ✓ Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: ✓ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material PVC
Threaded ____ Welded ____
RMP ____ PVC 9C
Dia. 5 in. to 140 ft. depth
Dia. ____ in. to ____ ft. depth
Height: Above or below
Surface 29 in.
Weight 2.58 lbs./ft.
Wall Thickness: inches or gage No. [redacted] .258

5. Type and color of material	From	To
Top Soil	0	3
Limestone, grey	3	45
Shale, yellow, grey	45	70
grey Lime	70	95
Limestone, yellow, loose	95	114
Shaley Limestone, grey	114	140
(Use a second sheet if needed)		

10. Screen: Manufacturer's name MDI
Type PVC Dia. 5
Slot gauze .020 Length 40
Set between 80 ft. and 120 ft.
____ ft. and ____ ft.
Gravel pack? ✓ Size range of material .030x.060

11. Static water level: mo./day/yr.
80 ft. below land surface Date 7-12-77

12. Pumping level below land surfaces:
____ ft. after ____ hrs. pumping ____ g.p.m.
____ ft. after ____ hrs. pumping ____ g.p.m.
Estimated maximum yield 20 g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes ✓ No Date ____

14. Well head completion: CAP
__ Pitless adapter 24 Inches above grade

15. Well grouted? ✓
With: ✓ Neat cement ____ Bentonite ____ Concrete
Depth: From 5 ft. to 15 ft.

16. Nearest source of possible contamination:
ft. 200 Direction W Type Septic
Well disinfected upon completion? ✓ Yes ____ No

17. Pump: ✓ Not installed
Manufacturer's name ____
Model number ____ HP ____ Volts ____
Length of drop pipe ____ ft. capacity ____ g.p.m.
Type:
__ Submersible __ Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

18. Elevation:

Topography:
✓ Hill
__ Slope
__ Upland
__ Valley

19. Remarks:
OWNER TO INSTAL SLAB

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.
Stander Daley Co Inc. 182
Business name License No.
Address Holton, Ks
Signed Dale Ashman Date 7-14-77
Authorized representative

T 12 R 4 E/W Sec 1 1/4 SW 1/4 SW 1/4 SW 1/4

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

Form WWC-5

MI-1023