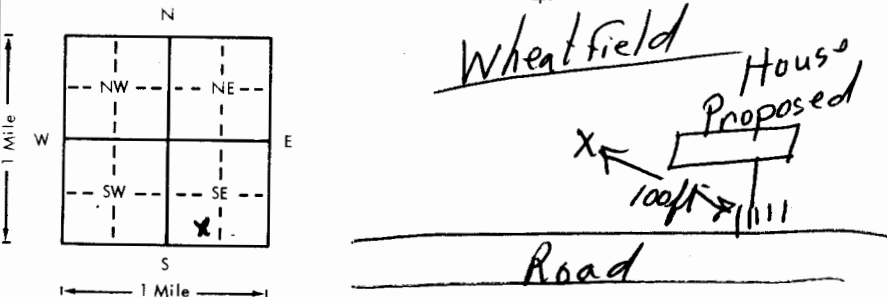


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 820-1201-1215

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

1. Location of well:		County <b>Morris</b>	Fraction <b>SE 1/4 SE 1/4 SW 1/4</b>	Section number <b>31</b>	Township number <b>T 16 S R 7 E</b>	Range number <b>7</b>
2. Distance and direction from nearest town or city: <b>1/2 mile West 2 mile south 1/2 west of Wilsey</b>				3. Owner of well: <b>Jerry Rohloff</b> R.R. or street: <b>Wilsey, KS</b> City, state, zip code:		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>6 3/4</b> in. Completion date <b>Nov 80</b> Well depth <b>71</b> ft. <b>8" to 13 ft</b>		
				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		
5. Type and color of material		From		To		8. Use: <input checked="" 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 type="checkbox"/> Oil field water <input type="checkbox"/> Other
Topsoil		1		5		9. Casing: Material <b>PVC</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>18</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <b>19</b> lbs./ft. Dia. <b>5</b> in. to <b>52</b> ft. depth Wall Thickness: inches or Dia. <b>5</b> in. to <b>52</b> ft. depth gage No. <b>200</b>
Red Rock		5		17		10. Screen: Manufacturer's name <b>Jess Lowell</b> Type <b>RMP</b> Dia. <b>5"</b> Slot/gauze <b>1/16</b> Length <b>19</b> Set between <b>52</b> ft. and <b>71</b> ft. Set between <b>52</b> ft. and <b>71</b> ft. Gravel pack? <b>NO</b> Size range of material
Lime - White		17		23		11. Static water level: <b>52</b> ft. below land surface Date <b>Nov 1 80</b> mo./day/yr.
Shale - Yel		23		30		12. Pumping level below land surfaces: ft. after <b>52</b> hrs. pumping <b>7</b> g.p.m. ft. after <b>52</b> hrs. pumping <b>7</b> g.p.m. Estimated maximum yield <b>7</b> g.p.m.
Lime - Yel		30		34		13. Water sample submitted: <b>NO</b> mo./day/yr. Yes <b>NO</b> No Date
Shale Yel		34		36		14. Well head completion: <b>18</b> inches above grade Pitless adapter <b>18</b>
Lime - Yellow same shale		36		51		15. Well grouted? <b>Yes</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>52</b> ft. to <b>71</b> ft.
Shale - Yel		51		54		16. Nearest source of possible contamination: ft. <b>100</b> Direction <b>SE</b> Type <b>sewage</b> Well disinfected upon completion? <b>Yes</b> No
Lime - Yel		54		57		17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name Model number <b>210</b> HP <b>1/4</b> Volts <b>115</b> Length of drop pipe <b>100</b> ft. capacity <b>1/4</b> 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
Shale Gray		57		70		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. <b>Zinn Water Well Drilling</b> Business name <b>Lost Springs, KS</b> License No. <b>210</b> Address <b>Lost Springs, KS</b> Signed <b>Joseph A. Zinn</b> Date <b>March 1981</b> Authorized representative
Lime		70		71		
(Use a second sheet if needed)						
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5