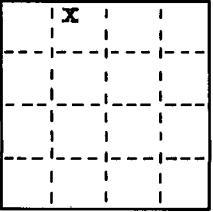


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County Marion	Township name Liberty	Fraction <i>NW 1/4 NE 1/4</i> NW 1/4	Section number 2	Town number 20-S	Range number 2-E		
Distance and direction from nearest town or city 1 1/2 mi. East Of Hillsboro			3 Owner of well: Clark Wiebe Address: Hillsboro Kansas					
Locate with "X" in section below: N  W E S 1 Mile			Sketch map:			4 Well depth: 69 ft. Date of completion 1-31-75 Well diameter 9 in.		
2 Type and color of material			From		To			
			Top Soil		0		4	
			Yellow Clay		4		40	
			Some Water		40			
			Red Shale and Clay		40		60	
			Water		60			
			Blue Shale		62		69	
			5 <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					
			6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>					
			7 Casing: Material Plastic Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. Diam. Class 160 lbs./ft. 5 in. to 69 ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No 5 in. to 69 ft. depth					
			8 Screen: Manufacturer Pumpco Supply Type Plastic Dia. 5" Slat/gauze 7/16 Length 10 feet Set between 55 ft. and 65 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/2-1/4					
			9 Static water level: 30 ft. below land surface Date 1-31-75					
			10 Pumping level below land surfaces: Not installed ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.					
			11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____					
			12 Well head completion: 12" <input type="checkbox"/> Flatless adapter <input checked="" type="checkbox"/> Inches above grade					
			13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 2.5 ft. to 13 ft.					
			14 Nearest source of possible contamination: ft. 30 Direction South Type cattle Lot Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
			15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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					
16 Remarks: elevation			17 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. <i>Josephus Dullberg 180</i> Business name _____ License No. _____ Address Lampas Pass Signed Josephus Dullberg Date 1-31 Authorized representative					

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5