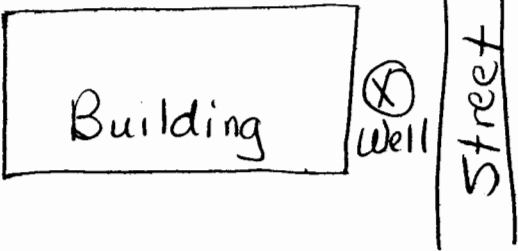


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 <u>Ellis</u>		Fraction <u>SW NE</u> <u>NE 1/4</u> <u>1/4</u>		Section number <u>3</u>	Township number <u>T 13 S</u>	Range number <u>R 18 E</u>
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>Hillside Dr.</u>				Owner of well: <u>E. F. D.</u> R.R. or street: <u>Hillside Drive</u> City, state, zip code: <u>Hays, Kansas 67601</u>		
Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 		6. Bore hole dia. <u>9</u> in. Completion date <u>4/27/76</u> Well depth <u>60</u> ft.		
5. Type and color of material		From		To		7. Cable tool <input checked="" 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
		Fill dirt		1 5		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		5 9		Casing: Material <u>PVC</u> Height: Above or below <u>10</u> in. Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>10</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>5</u> in. to <u>60</u> ft. depth <input checked="" type="checkbox"/> Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>258</u>		
Subsoil		9 15		10. Screen: Manufacturer's name <u>Jet Stream</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <input checked="" type="checkbox"/> Length <u>10'</u> Set between <u>49</u> ft. and <u>59</u> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <u>1/4"</u>		
Brown Clay		15 30		11. Static water level: <input type="checkbox"/> mo./day/yr. <u>40</u> ft. below land surface Date <u>4/27/76</u>		
Brown Clay with white Rock		30 45		12. Pumping level below land surfaces: <u>44</u> ft. after <u>1</u> hrs. pumping <u>10</u> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <u>10</u> g.p.m.		
Gravel		45 56		13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
Blue shale		56 60		14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade <input checked="" type="checkbox"/> Well grouted? <u>Yes</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>4</u> ft. to <u>12</u> ft.		
				16. Nearest source of possible contamination: ft. <u>1000</u> Direction <u>NW</u> Type <u>Septic tank</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>F &amp; W</u> Model number <u>5BA8</u> HP <u>1/2</u> Volts <u>220</u> Length of drop pipe <u>55</u> ft. capacity <u>10</u> 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		
				18. Elevation:		
				19. Remarks: <u>None</u>		
				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. <u>Karst Water Well 199A</u> Business name <u>E Hwy 40 Hays</u> License No. <u>1/4</u> Address <u>11 B...</u> Date <u>4/27/76</u> Signed <u>[Signature]</u> Authorized representative		

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

Form WWC-5