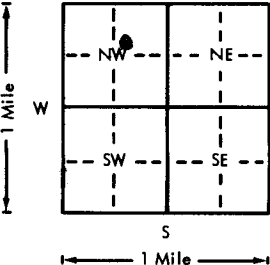


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 1/4 E 1/4 NW 1/4</u>	Section number <u>32</u>	Township number <u>T 13</u>	Range number <u>R 18</u>	<u>(NW)</u>
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>Rt. 1 Hays</u>			3. Owner of well: <u>Victor Fisher</u> R.R. or street: <u>Rt 1</u> City, state, zip code: <u>Hays</u>			
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map: 		8. Bore hole dia. <u>9</u> in. Completion date <u>5-1-79</u> Well depth <u>45</u> ft.	
5. Type and color of material			From	To	7. <input type="checkbox"/> 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	
<u>Topsoil</u>			<u>0</u>	<u>4</u>	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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	
<u>fine sand</u>			<u>4</u>	<u>26</u>	9. Casing: Material <u>PVC</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>24</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>200</u> lbs./ft. Dia. <u>5</u> in. to <u>45</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>26</u>	
<u>medium gravel</u>			<u>26</u>	<u>42</u>	10. Screen: Manufacturer's name <u>Setstream</u> Type <u>PVC</u> Dia. <u>5</u> Slot gauge <u>.031</u> Length <u>10</u> Set between <u>35</u> ft. and <u>45</u> ft. <u> </u> ft. and <u> </u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4-1/2</u>	
<u>blue shale</u>			<u>42</u>	<u>45</u>	11. Static water level: <u>30</u> ft. below land surface Date <u>5-1-79</u> mo./day/yr.	
					12. Pumping level below land surfaces: <u>20</u> ft. after <u>1</u> hrs. pumping <u>15</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>15</u> g.p.m.	
					13. Water sample submitted: <u> </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>	
					14. Well head completion: <input type="checkbox"/> Pitless adapter <u>24</u> inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.	
					16. Nearest source of possible contamination: <u>NONE</u> ft. <u> </u> Direction <u> </u> Type <u> </u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> g.p.m. Type: <u> </u> <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
					(Use a second sheet if needed)	
18. Elevation:		19. Remarks:		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>Robert Water Well Inc</u> Business name <u> </u> License No. <u> </u> Address <u>514 W 40th St</u> Signed <u> </u> Date <u>5-1-79</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 13 R 18 W E 32 Sec 1/4 1/4 1/4

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

Form WWC-5