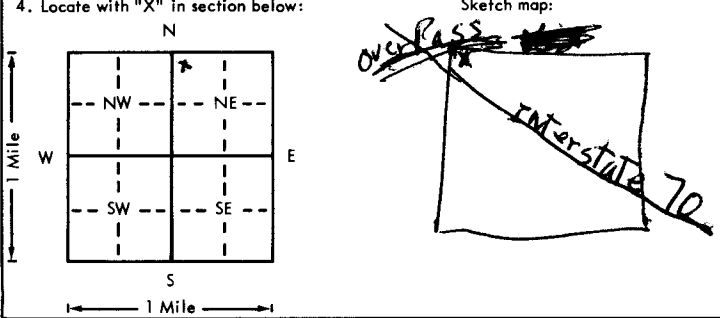


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <b>Ellis</b>	Fraction <b>NW 1/4NW 1/4 NE 1/4</b>	Section number <b>35</b>	Township number <b>T 13</b>	Range number <b>S R 18</b>															
2. Distance and direction from nearest town or city: <b>1 E of Hays</b>			3. Owner of well: <b>Leroy Gottchalk</b> R.R. or street: <b>171 Vine St.</b> City, state, zip code: <b>Hays, Kansas</b>																	
4. Locate with "X" in section below: 			6. Bore hole dia. <b>8</b> in. Completion date _____ Well depth <b>43</b> ft. <b>2/16/77</b>																	
5. Type and color of material			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																	
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;"></th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td><b>silt + clay</b></td> <td><b>0</b></td> <td><b>15</b></td> </tr> <tr> <td><b>sand + clay</b></td> <td><b>15</b></td> <td><b>24</b></td> </tr> <tr> <td><b>yellow clay</b></td> <td><b>24</b></td> <td><b>43</b></td> </tr> <tr> <td><b>shale</b></td> <td><b>43</b></td> <td></td> </tr> </tbody> </table>				From	To	<b>silt + clay</b>	<b>0</b>	<b>15</b>	<b>sand + clay</b>	<b>15</b>	<b>24</b>	<b>yellow clay</b>	<b>24</b>	<b>43</b>	<b>shale</b>	<b>43</b>		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		
				From	To															
			<b>silt + clay</b>	<b>0</b>	<b>15</b>															
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			<b>yellow clay</b>	<b>24</b>	<b>43</b>															
<b>shale</b>	<b>43</b>																			
9. Casing: Material <b>ptis</b> Height: <b>43</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>43</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>43</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____			10. Screen: Manufacturer's name <b>valley steel</b> Type <b>PVC</b> Dia. <b>5</b> in. Slot/gouze <b>1/4</b> Length <b>20</b> ft. Set between <b>23</b> ft. and <b>43</b> ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/2 down</b>																	
11. Static water level: _____ mo./day/yr. <b>15</b> ft. below land surface Date <b>2/16/77</b>			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>6</b> g.p.m.																	
13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____			14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade																	
15. Well grouted? <input checked="" type="checkbox"/> With <b>clay</b> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>1.5</b> ft.			16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No																	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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			18. Elevation:  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley																	
19. Remarks:  (Use a second sheet if needed)			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>Aqua Well Drilling</b> 281 Business name _____ License No. _____ Address <b>Gove, Kansas</b> Signed <b>Leroy Gottchalk</b> Date <b>6-20/77</b> Authorized representative																	

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

Form WWC-5