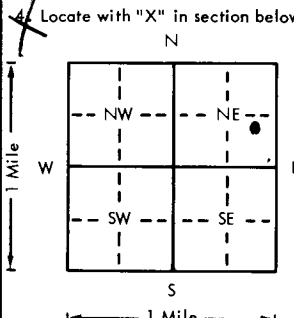


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>SE 1/4 NE 1/4 NE 1/4</u>	Section number: <u>16</u>	Township number: T <u>14</u>	Range number: S <u>18</u> E <u>W</u>
2. Distance and direction from nearest town or city: <u>2.5 mile south</u>		3. Owner of well: <u>Lowell Johannes</u>			
Street address of well location if in city: <u>of Hays, Kas. 67601</u>		R.R. or street: <u>219 E. 29</u>			
		City, state, zip code: <u>Hays Ka 67601</u>			
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. <u>12</u> in. Completion date <u>6-11-79</u> Well depth <u>61</u> ft.		
			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		
			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		
			9. Casing: Material <u>Plastic</u> Height <u>Above</u> or below Threaded <input type="checkbox"/> Welded <u>Plastic</u> Surface <u>TS</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>5</u> in. to <u>47</u> ft. depth Wall Thickness: <input type="checkbox"/> inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>460</u>		
5. Type and color of material			From	To	10. Screen: Manufacturer's name <u>Jess & Lemell</u>
<u>Clay (Brown)</u>			<u>0</u>	<u>38</u>	Type <u>plastic</u> Dia. <u>5</u>
<u>F. Gray Sand m/c S. Sand & White gravel (small)</u>			<u>38</u>	<u>61</u>	Slot/gouze Length <u>20</u>
<u>Blue River mud soft</u>			<u>61</u>	<u>66</u>	Set between <u>47</u> ft. and <u>61</u> ft.
<u>Shale (dark firm) Blue</u>			<u>66</u>	<u>67</u>	ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/8 - 3/8</u>
					11. Static water level: <u>44</u> ft. below land surface Date <u>6-11-79</u> mo./day/yr.
					12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <u>15</u> <u>galing</u> 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: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>5</u> ft. to <u>15</u> ft.
					16. Nearest source of possible contamination: ft. <u>150</u> Direction <u>NE</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 _____ 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
			(Use a second sheet if needed)		
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>no pump installed</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>Louis Water Well Drilling 276</u> Business name _____ License No. _____ Address: <u>503 Monroe Ellis, Kas.</u> Signed: <u>John Louis</u> Date <u>6-11-79</u> Authorized representative		

T 14 R 18 W E
Sec 16 SE NE NE

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

Form WWC-5