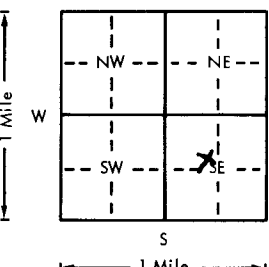


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82g-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

County: Ellsworth		Fraction: SE 1/4 NW 1/4 SE 1/4	Section number: 1	Township number: 14	Range number: 6W	E/W: E/W
1. Location of well:		2. Distance and direction from nearest town or city: 7 mi NW of Brookville ks		3. Owner of well: Tom Belcher		
Street address of well location if in city:		R.R. or street: Rt. 1		City, state, zip code: Brookville Kans 67425		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 6 in. Completion date: 3-8-77		
				Well depth 60 ft.		
5. Type and color of material		From		To		7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug
Colluvium:						<input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary
0 Silt + sand, fine		0		27		8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry
Known fm:						<input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock
Shale, gray		27		31		<input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
Shale, gray + sandstone, fine		31		56		9. Casing: Material <input type="checkbox"/> Height: above or below
Sandstone, fine to medium		56		60		Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in.
						RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft.
						Dia. 4 in. to 60 ft. depth Wall Thickness: inches or
						Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 5.40
						10. Screen: Manufacturer's name Shep
						Type slots Dia. 4"
						Slot/gauze 1/16 Length 3'
						Set between 57 ft. and 60 ft.
						<input type="checkbox"/> ft. and <input type="checkbox"/> ft.
						Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/8
						11. Static water level: 19.5 ft. below land surface Date 3-8-77
						12. Pumping level below land surfaces:
						45 ft. after 1/2 hrs. pumping 12 g.p.m.
						<input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m.
						Estimated maximum yield 15 g.p.m.
						13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>
						14. Well head completion: <input type="checkbox"/> Pitless adapter 12 inches above grade
						15. Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete
						Depth: From 3 ft. to 13 ft.
						16. Nearest source of possible contamination:
						ft. 130' Direction NW Type Septic T
						Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						17. Pump: <input checked="" type="checkbox"/> Not installed
						Manufacturer's name <input type="checkbox"/>
						Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/>
						Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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:		19. Remarks:		20. Water well contractor's certification:		
Topography:				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
<input checked="" type="checkbox"/> Hill				Hyphonic Drilling 126		
<input checked="" type="checkbox"/> Slope				Business name Salina Wells License No. <input type="checkbox"/>		
<input type="checkbox"/> Upland				Address <input type="checkbox"/>		
<input type="checkbox"/> Valley				Signed Orl. Faust Date 4-11-77		
				Authorized representative		

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

Form WWC-5