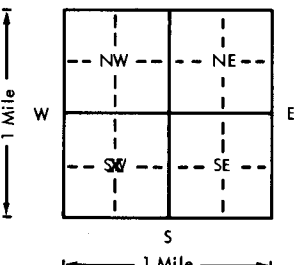


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 Ellis	Fraction 1/4 C 1/4 SW/4	Section number 27	Township number T 15 S R 17 E	Range number 17		
2. Distance and direction from nearest town or city: 1-3/4-W of Pfeifer, Ks. Street address of well location if in city:				3. Owner of well: Ralph Roth R.R. or street: none City, state, zip code: Pfeifer, Kansas 67660				
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map: 			6. Bore hole dia. 29 in. Completion date _____ Well depth 45 ft. 7-23-75		
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			
					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			
					9. Casing: Material steel Height: Above or Below Threaded _____ Welded _____ Surface 18 in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. 16 in. to 45 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. 7			
					10. Screen: Manufacturer's name Johnson Type steel Dia. _____ Slot 3/16 3/16 Length 10 Set between 35 ft. and 45 ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 3/4 3/8			
					11. Static water level: _____ mo./day/yr. 11 ft. below land surface Date 2-26-75			
					12. Pumping level below land surfaces: 33 ft. after 1 hrs. pumping 500 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 650 g.p.m.			
					13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date 2-26-75			
					14. Well head completion: <input type="checkbox"/> Pitless adapter _____ 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 0 ft. to 10 ft.			
					16. Nearest source of possible contamination: ft. 1/4 mile Direction se Type septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
					17. Pump: _____ Not installed Manufacturer's name W.L.R. Model number 6-10CH HP 40 Volts _____ Length of drop pipe 35 ft. capacity 600 g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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:			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. Rosencrantz-Bemis 134 Business name License No. Address Great Bend, Kansas 67530 Signed S. Kilgore Date 6-19-77 Authorized representative			

T
R
15
17
27
1/4
1/4
1/4
SW

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

Form WWC-5