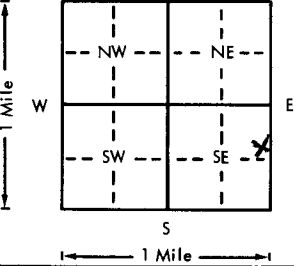


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <i>Ellis</i>	Fraction <i>SE 1/4 NE 1/4 SE 1/4</i>	Section number <i>25</i>	Township number T <i>15</i> S R <i>18</i> E/W	Range number
2. Distance and direction from nearest town or city: <i>3 N. 3 E. 1 1/8 N of Liebenthal KS</i> Street address of well location if in city:			3. Owner of well: <i>Don Wirth</i> R.R. or street: <i>Major Route</i> City, state, zip code: <i>Way, Kansas 67601</i>			
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map: 		6. Bore hole dia. <i>12 1/2</i> in. Completion date Well depth <i>38</i> ft. <i>11-30-77</i>	
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	
<i>Top soil</i>			<i>0</i>	<i>3</i>	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	
<i>Brown clay</i>			<i>3</i>	<i>21</i>	9. Casing: Material <i>PVC</i> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <i>18</i> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <i>6</i> in. to <i>28</i> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <i>280</i>	
<i>Sand & gravel some clay & Rock</i>			<i>21</i>	<i>28</i>	10. Screen: Manufacturer's name <i>Certa-rod</i> Type <i>PVC</i> Dia. <i>6</i> Slot <i>1/16</i> Length <i>10'</i> Set between <i>28</i> ft. and <i>38</i> ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <i>2 3/4 3/8</i>	
<i>Medium Sand & gravel</i>			<i>28</i>	<i>38</i>	11. Static water level: _____ mo./day/yr. <i>26</i> ft. below land surface Date <i>11-30-77</i>	
<i>Shale</i>			<i>38</i>	<i>40</i>	12. Pumping level below land surfaces: <i>NA</i> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
					13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <i>11-30-77</i>	
					14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <i>18</i> 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 <i>0</i> ft. to <i>10</i> ft.	
					16. Nearest source of possible contamination: ft. <i>200</i> Direction <i>West</i> Type <i>canal</i> Well disinfected upon completion? <input checked="" 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	
			(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. <i>Don Wirth - 3015</i> <i>134</i> Business name _____ License No. _____ Address <i>Great Bend, Kansas 67530</i> Signed <i>Sandy Kilgus</i> Date <i>12-8-77</i> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

15-18-25-SE 1/4 NE 1/4

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

Form WWC-5