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

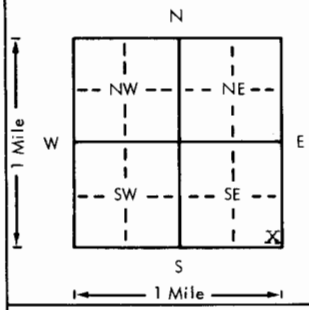
1. Location of well:	County	Fraction	Section number	Township number	Range number
	Barton	se 1/4 se 1/4 se 1/4	15	T 17 S	R 15 E (W)

2. Distance and direction from nearest town or city:
5-S of Galatia, Ks.
Street address of well location if in city:

3. Owner of well: Emery Witt Jr.
R.R. or street: Box 96 Rt. 4-All Seasons Mb. Hm. Pk.
City, state, zip code: Great Bend, Kansas 67530

4. Locate with "X" in section below:

Sketch map:



6. Bore hole dia. 10 in. Completion date
Well depth 47 ft. 3-8-79

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: X Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material pvc Height: Above or ~~below~~
Threaded ___ Welded ___ Surface 24 in.
RMP ___ PVC X Weight ___ lbs./ft.
Dia. 5 in. to 47 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. .258

5. Type and color of material	From	To
top soil	0	3
brown clay	3	36
sand & gravel w/clay mixed	36	47
? rock	47	
(Use a second sheet if needed)		

10. Screen: Manufacturer's name CertainTeed
Type pvc Dia.
Slot ~~size~~ 1/16 Length 10
Set between 37 ft. and 47 ft.
ft. and ft.
Gravel pack? X Size range of material 3/4 3/8

11. Static water level: mo./day/yr.
22 ft. below land surface Date 3-8-79

12. Pumping level below land surfaces:
22 ft. after 1 hrs. pumping 10 g.p.m.
ft. after hrs. pumping g.p.m.
Estimated maximum yield 25 g.p.m.

13. Water sample submitted: mo./day/yr.
X Yes __ No Date 3-8-79

14. Well head completion:
__ Pitless adapter ___ Inches above grade

15. Well grouted? X
With: X Neat cement __ Bentonite __ Concrete
Depth: From 0 ft. to 12 ft.

16. Nearest source of possible contamination:
ft. 300 Direction nw Type septic
Well disinfected upon completion? X Yes __ No

17. Pump: X Not installed
Manufacturer's name
Model number HP Volts
Length of drop pipe ft. capacity g.p.m.
Type:
__ Submersible __ Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

18. Elevation:
Topography:
__ Hill
__ Slope
__ Upland
X 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 Sandy Kilgore Date 3-21-79
Authorized representative

T 17 R 15 E (W) Sec 15 SE SE SE 1/4 1/4 1/4

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

Form WWC-5