

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 NESS	Fraction SW 1/4 SW 1/4 SE 1/4	Section number 34	Township number T 18 S R 25 E/W	Range number 25															
2. Distance and direction from nearest town or city: 7 1/2 MILES WEST			3. Owner of well: LEROY FRITZLER & SON'S RANCH																	
Street address of well location if in city: 1 MILE SOUTH FROM NESS CITY			City, state, zip code: ALEXANDER, KANSAS 67513																	
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>65</u> ft. <u>13-DEC-77</u>																
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">5. Type and color of material</th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> <tr> <td>BROWN CLAY</td> <td>0</td> <td>34</td> </tr> <tr> <td>BLACK CLAY</td> <td>34</td> <td>43</td> </tr> <tr> <td>SAND AND WHITE ROCK</td> <td>45</td> <td>63</td> </tr> <tr> <td>BLACK SHALE</td> <td>63</td> <td>60</td> </tr> </table>		5. Type and color of material	From	To	BROWN CLAY	0	34	BLACK CLAY	34	43	SAND AND WHITE ROCK	45	63	BLACK SHALE	63	60	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	
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BROWN CLAY	0	34																		
BLACK CLAY	34	43																		
SAND AND WHITE ROCK	45	63																		
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		8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other																		
		9. Casing: Material _____ Height: Above or below _____ Threaded _____ Welded <input checked="" type="checkbox"/> Surface <u>24</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>45</u> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth Gauge No. <u>SCH. 40</u>																		
		10. Screen: Manufacturer's name _____ SOLD BY PUMPCO Type <u>PVC</u> Dia. <u>5</u> in. Slot/gauze <u>1/16</u> Length <u>10</u> Set between <u>45</u> ft. and <u>65</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> YES Size range of material <u>#1</u>																		
		11. Static water level: _____ mo./day/yr. <u>31</u> ft. below land surface Date <u>13-12-77</u>																		
		12. Pumping level below land surfaces: <u>34</u> ft. after <u>2</u> hrs. pumping <u>12</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>40-60</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 <u>24</u> inches above grade																		
		15. Well grouted? <input checked="" type="checkbox"/> Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.																		
		16. Nearest source of possible contamination: ft. <u>60</u> Direction <u>NORTH</u> Type <u>CREEK</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																		
		17. Pump: _____ Not installed Manufacturer's name <u>WINDMILL AND</u> Model number <u>3" cylinder</u> Volts _____ Length of drop pipe <u>32</u> ft. capacity <u>3 1/2</u> 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. DEAN WATERHOUSE DRILLING 243 Business name _____ License No. _____ Address <u>HANSTON, KANSAS</u> Signed <u>Dean Waterhouse</u> Date <u>11-14-77</u> Authorized representative																	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley																				

T 18 R 25 E Sec 34

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

Form WWC-5