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

WATER WELL RECORD
KSA 82a-1201-1215

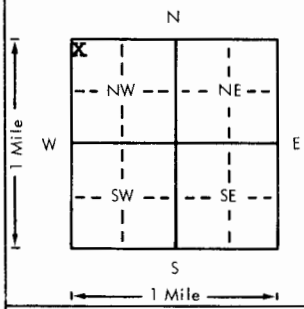
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Barton	NW 1/4 NW 1/4 NW 1/4	15	T 19 S	R 13 E/W

2. Distance and direction from nearest town or city:
2 mi. N. on Frey St. Rd. from Great Bend, Ks.
Street address of well location if in city:

3. Owner of well:
R.R. or street: LeRoy Wellbrock
2224 McKinley
City, state, zip code: Great Bend, Kansas 67530

4. Locate with "X" in section below: Sketch map:



6. Bore hole dia. 11 in. Completion date
Well depth 48 ft. 3-28-78

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

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

9. Casing: Material pvc Height: Above or below
Threaded ___ Welded ___ Surface 18 in.
RMP ___ PVC X Weight ___ lbs./ft.
Dia. 6 5/8 48 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. .280

5. Type and color of material	From	To
Black top soil	0	3
Dark brown clay	3	15
Light brown clay	15	22
Light brown clay with black river mud	22	26
Sand & gravel with black mud	26	30
Sand & gravel	30	45
Gray & red clay	45	
BR 45'		
DRC		

(Use a second sheet if needed)

10. Screen: Manufacturer's name
CertainTeed
Type pvc Dia.
Slot/gage xx 1/16 Length 15
Set between 33 ft. and 48 ft.
___ ft. and ___ ft.
Gravel pack? X Size range of material ½ 3/4 3/8

11. Static water level: mo./day/yr.
17 ft. below land surface Date 3-28-78

12. Pumping level below land surfaces:
17 ft. after ½ hrs. pumping 30 g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield ___ g.p.m.

13. Water sample submitted: mo./day/yr.
X Yes ___ No Date 3-28-78

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

15. Well grouted? X
With: X Neat cement ___ Bentonite ___ Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination:
ft. 400 Direction North Type septic
Well disinfected upon completion? HTH 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

T 19 R 13 E/W Sec 15 1/4 1/4 1/4 1/4 NW NW NW

18. Elevation:

Topography:
___ Hill
___ Slope
X Upland
___ 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 4-6-78
Authorized representative

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

Form WWC-5

MI-1023