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

WATER WELL RECORD
KSA 82a-1201-1215

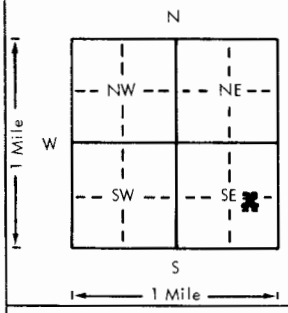
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Barton	1/4 CW 1/2 1/4 SE 1/4	29	T 19 S	R 13 E/W

2. Distance and direction from nearest town or city: 3214 Forest Street. Great Bend, Ks
Street address of well location if in city:

3. Owner of well: George Schultz
R.R. or street: 3214 Forest
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 60 ft. 6-1-78

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
Threaded __ Welded __ Surface 18 in.
RMP __ PVC X Weight __ lbs./ft.
Dia. 5 in. to 60 ft. depth Wall Thickness: inches or
Dia. 5 in. to 60 ft. depth gage No. .258

5. Type and color of material	From	To
Top soil	0	2
Clay	2	4
Sand & gravel	4	28
Brown clay	28	33
Sand & gravel	33	42
Brown clay	42	44
Sand & gravel	44	59
Clay	59	65

(Use a second sheet if needed)

10. Screen: Manufacturer's name CertainTeed
Type pvc Dia.
Slot 1/16 Length 20
Set between 40 ft. and 60 ft.
ft. and ft.
Gravel pack? X Size range of material 1/2 3/4 3/8

11. Static water level: mo./day/yr.
15 ft. below land surface Date 6-1-78

12. Pumping level below land surfaces: na
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.
X Yes __ No Date 6-1-78

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. 20 Direction East Type oldwell
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

18. Elevation:

Topography:
__ Hill
__ Slope
__ Upland
X Valley

19. Remarks:
Old well was pulled and plugged with well cuttings & gravel pack.

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 6-12-78
Authorized representative

T 19 R 13 E/W Sec 29 1/4 1/4 CW/SE

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

Form WWC-5

MI-1023