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

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

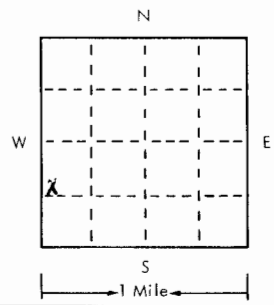
Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County	Township name	Fraction	Section number	Town number	Range number
	Barton		SW NW SW	4	20S	13W

Distance and direction from nearest town or city:
Street address of well location if in city: 1S. Great Bend KS

3 Owner of well: Pat Streck
Address: Route 2, Great Bend, KS

Locate with "X" in section below:



Sketch map:

4 Well depth: 68 ft. Date of completion 2-18-75
Well diameter 8 in.

5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary

6 Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ☐ _____

7 Casing: Material PVC Height: above/below
Threaded ☐ Welded ☐ Surface 12 in.
Diam. 5 in. to 68 ft. depth Weight _____ lbs./ft.
_____ in. to _____ ft. depth Drive shoe? ☐ Yes ☒ No

2 Type and color of material	From	To
Top Soil - Clay	0	12
Sand - Gravel	12	30
Clay	30	42
Sand - Gravel	42	68
(use a second sheet if needed)		

8 Screen:
Manufacturer M.P.I.
Type drilled Dia. 5"
Slot/gauze 18 Length 20'
Set between 48 ft. and 68 ft.
Fittings:
Gravel pack ☒ Yes ☐ No Size range of material 1/8" 3/4"

9 Static water level:
16 ft. below land surface Date 2-18-75

10 Pumping level below land surfaces:
_____ ft. after _____ hrs. pumping _____ g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield 50 g.p.m.

11 Water sample submitted:
☐ Yes ☒ No Date _____

12 Well head completion:
☐ Pitless adapter ☒ 12" Inches above grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐ _____
Depth: From 4 ft. to 14 ft.

14 Nearest source of possible contamination:
ft. 200 Direction S Type Septic Tank
Well disinfected upon completion? ☒ Yes ☐ No

15 Pump: ☒ Not installed
Manufacturer's name _____
Model number _____ HP _____ Volts _____
Length of drop pipe _____ ft. capacity _____ g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Reciprocating
☐ Certrifugal ☐ Other

16 Remarks: elevation

Topography:
☐ Hill
☒ Slope
☐ Upland
☐ Valley

17 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.
Business name Kelly's Water Well Service License No. 186
Address R 7 Great Bend KS
Signed Kelly Pruss Date 2-20-75
Authorized representative

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5

677-H