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		NW NW	21	20S	13W

Distance and direction from nearest town or city: 3S 1W

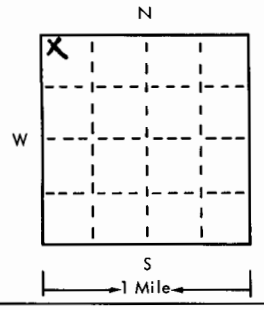
Street address of well location if in city: Great Bend, KS

3 Owner of well: Dale Engle Mdn

Address: R 2 Great Bend, KS.

Locate with "X" in section below:

Sketch map:



4 Well depth: 67 ft. Date of completion 7-31-75
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. Weight _____ lbs./ft.
5 in. to 67 ft. depth Drive shoe? ☐ Yes ☒ No
_____ in. to _____ ft. depth

2 Type and color of material	From	To
Top Soil-Clay	0	22
Sand-Gravel	22	67

8 Screen:
Manufacturer MPI
Type PVC Dia. 5
Slot/gauze 40 Length 20'
Set between 47 ft. and 67 ft.
Fittings: 1/8 - 3/4"
Gravel pack ☒ Yes ☐ No Size range of material _____

9 Static water level:
19 ft. below land surface Date 7-31-75

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: 12
☐ Pitless adapter ☒ Inches above grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐ _____
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:
ft. 100 Direction SE 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

(use a second sheet if needed)

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.
Kelly's Water Well Serv 186
Business name License No.
Address R2 Great Bend, KS
Signed Kelly Price Date 8-18-75
Authorized representative

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

Form WWC-5