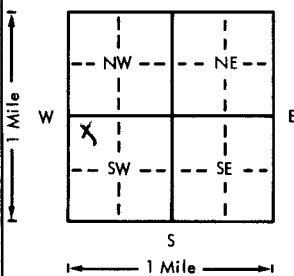


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 <u>Pawnee</u>	Fraction <u>NW 1/4 NW 1/4 SW 1/4</u>	Section number <u>22</u>	Township number T <u>21</u> S	Range number R <u>19</u> <u>EW</u>
2. Distance and direction from nearest town or city: Street address of well location if in city:				3. Owner of well: R.R. or street: City, state, zip code:		
<u>3/4 N.</u> <u>Rozel, KS</u>				<u>Bert - Wetta Sales</u> <u>Rozel, KS</u>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>30</u> in. Completion date <u>10-26-76</u> Well depth <u>185</u> ft.		
				7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary		
5. Type and color of material				8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
				9. Casing: Material <u>Steel</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>24</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>16</u> in. to <u>105</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <u>188</u>		
				10. Screen: Manufacturer's name <u>Doerrs</u> Type <u>Steel</u> Dia. <u>16</u> Slot/gauze <u>1/8"</u> Length <u>80</u> Set between <u>105</u> ft. and <u>185</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 - 3/4"</u>		
				11. Static water level: <u>40</u> ft. below land surface Date <u>10-26-76</u>		
				12. Pumping level below land surfaces: ft. after <u>101</u> hrs. pumping <u>800</u> g.p.m. ft. after <u>4</u> hrs. pumping <u>800</u> g.p.m. Estimated maximum yield <u>800</u> g.p.m.		
				13. Water sample submitted: <u>Yes</u> <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u>10-26-76</u>		
				14. Well head completion: <input type="checkbox"/> Pitless adapter <u>24</u> inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
				16. Nearest source of possible contamination: <u>None</u> ft. <u>      </u> Direction <u>      </u> Type <u>      </u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				17. Pump: <u>Not installed</u> Manufacturer's name <u>Goulds</u> Model number <u>6103</u> HP <u>50</u> Volts <u>460</u> Length of drop pipe <u>170</u> ft. capacity <u>800</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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. <u>Kellys Water Well Ser 186</u> Business name <u>R 2 Great Benth, KS</u> License No. <u>      </u> Address <u>      </u> Signed <u>Kelly Price</u> Date <u>11-19</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

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

Form WWC-5