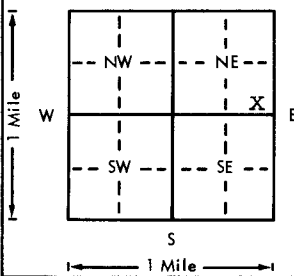


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

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

<b>X</b> 1. Location of well:	County <u>Pawnee</u>	Fraction <u>se 1/4 se 1/4 ne 1/4</u>	Section number <u>16</u>	Township number <u>T 23 S R</u>	Range number <u>17 EW</u>
<b>X</b> 2. Distance and direction from nearest town or city: Street address of well location if in city:	1-S <del>3</del> -W <del>1/2</del> -N from <del>York</del> Ks. west side <del>York</del>		3. Owner of well: <u>Wendell Fertig</u> R.R. or street: <u>none</u> City, state, zip code: <u>Garfield, Kansas 67529</u>		
4. Locote with "X" in section below: N 1 Mile W E S 1 Mile			Sketch map: 		
5. Type and color of material			From	To	6. Bore hole dia. <u>1 1/4</u> in. Completion date _____ Well depth <u>70</u> ft. <u>3-21-79</u>
top soil			0	3	7. <input checked="" type="checkbox"/> Cable tool <input checked="" 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 type="checkbox"/> Reverse rotary
hard clay			3	28	8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input 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
sand			28	32	9. Casing: Material <u>PVC</u> Height: Above or <del>below</del> Threaded _____ Welded _____ Surface <u>18</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>6-5/8</u> to <u>70</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>280</u>
* brown clay			32	38	10. Screen: Manufacturer's name _____ <u>CertainTeed</u> Type <u>pvc</u> Dia. _____ Slot <del>size</del> <u>1/16</u> Length <u>20</u> Set between <u>50</u> ft. and <u>70</u> ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4 3/8</u>
fine sand			38	50	11. Static water level: _____ mo./day/yr. <u>29</u> ft. below land surface Date <u>3-21-79</u>
sand & gravel			50	61	12. Pumping level below land surfaces: <u>29</u> ft. after <u>1</u> hrs. pumping <u>60</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>150</u> g.p.m.
rock w/clay mixed			61	63	13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>3-21-79</u>
fine sand			63	70	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade
hard clay			70		15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.
					16. Nearest source of possible contamination: ft. <u>300</u> Direction <u>ne</u> Type <u>oilwell</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input 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:  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> 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. <u>Rosencrantz-Bemis</u> <u>134</u> Business name License No. Address <u>Great Bend, Kansas 67530</u> Signed <u>Sandy Kilgore</u> Date <u>4-19-79</u> Authorized representative		

T 23 S R 17 W 16 SE SE NE 1/4 1/4 SW 1/4

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

Form WWC-5