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

WATER WELL RECORD
KSA 82a-1201-1215

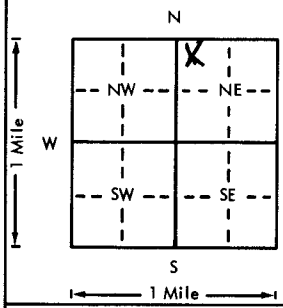
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Edwards	NW 1/4 NW 1/4 NE 1/4	15	T 26 S	R 16 E (W)

2. Distance and direction from nearest town or city: ½-S 3-E 1-S ½ W. So. side from Trousdale, Ks.
Street address of well location if in city:

3. Owner of well: Ron Schultz
R.R. or street: none
City, state, zip code: Trousdale, Ks. 67145

4. Locate with "X" in section below:



Sketch map:

Directions should be: ½-S 2-E 1-S ½-W south side from Trousdale, Ks.

6. Bore hole dia. 8 3/4 in. Completion date ____
Well depth 73 ft. 11-13-78

7. __ Cable tool ✓ Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning ✓ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material PVC Height: Above or below
Threaded ____ Welded ____ Surface 18 in.
RMP ____ PVC ✓ Weight ____ lbs./ft.
Dia. 5 in. to 73 ft. depth Wall Thickness: inches or
Dia. ____ in. to ____ ft. depth gage No. .258

5. Type and color of material	From	To
Sandy topsoil	0	2
fine sand & clay	2	16
sand & gravel	16	80
(Use a second sheet if needed)		

10. Screen: Manufacturer's name Certainteed
Type PVC Dia. ____
Slot 1/16 Length 20
Set between 73 ft. and 53 ft.
____ ft. and ____ ft.
Gravel pack? X Size range of material ½ 3/4 3/8

11. Static water level: mo./day/yr.
13 ft. below land surface Date 11-13-78

12. Pumping level below land surface:
____ 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.
✓ Yes ____ No Date 11-13-78

14. Well head completion:
____ Pitless adapter ____ Inches above grade

15. Well grouted? ✓
With: ✓ Neat cement ____ Bentonite ____ Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination:
ft. 1300 Direction S.E. Type Irrig. well
Well disinfected upon completion? ✓ Yes ____ No

17. Pump: ✓ 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
✓ 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.
Rosencrantz-Bemis 134
Business name License No.
Address Great Bend, Ks. 67530
Signed Sandy Kilgore Date 11-29-78
Authorized representative

T 26 R 16 E (W) Sec 15 1/4 NE NW NE 1/4

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

Form WWC-5

MI-1023