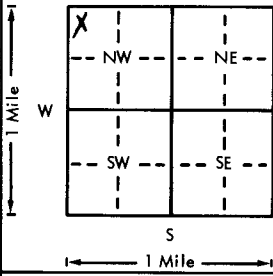


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>Edwards</u>	Fraction <u>NW 1/4 NW 1/4 NW 1/4</u>	Section number <u>27</u>	Township number <u>T 26 S</u>	Range number <u>R 17 E/W</u>
2. Distance and direction from nearest town or city: <u>1W of Fellsburg 4mi S. of Fellsburg, Ks.</u> Street address of well location if in city:			3. Owner of well: <u>Jake Roenbaugh</u> R.R. or street: City, state, zip code: <u>Lewis, Ks.</u>		
4. Locate with "X" in section below: N 1 Mile W E S 1 Mile		Sketch map: 		6. Bore hole dia. <u>9 7/8</u> in. Completion date <u>3-29-77</u> Well depth <u>50</u> ft.	
5. Type and color of material		From	To	7. <input 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	
Sandy Top Soil		0	2	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
Clay		2	13	9. Casing: Material <u>pvc</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>180</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>160</u> lbs./ft. Dia. <u>4</u> in. to <u>50</u> ft. depth Wall Thickness: inches or Dia. <u>4</u> in. to <u>50</u> ft. depth gage No. <u>237</u>	
Fine Sand & Clay		13	17	10. Screen: Manufacturer's name <u>Certain-Teen</u> Type <u>pvc</u> Dia. <u>4</u> Slot/gauge <u>1/16</u> Length <u>20</u> Set between <u>30</u> ft. and <u>50</u> ft. ft. and <u>50</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/4 3/8</u>	
Fine Sand & Gravel		17	26	11. Static water level: <u>16</u> ft. below land surface Date <u>3-29-77</u> mo./day/yr.	
Good Sand & Gravel		26	50	12. Pumping level below land surfaces: <u>NA</u> ft. after <u>   </u> hrs. pumping <u>   </u> g.p.m. ft. after <u>   </u> hrs. pumping <u>   </u> g.p.m. Estimated maximum yield <u>   </u> g.p.m.	
				13. Water sample submitted: <u>   </u> mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <u>3-29-77</u>	
				14. Well head completion: <input type="checkbox"/> Pitless adapter <u>   </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: ft. <u>600</u> Direction <u>W</u> Type <u>septic tank</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 <u>   </u> Model number <u>   </u> HP <u>   </u> Volts <u>   </u> Length of drop pipe <u>   </u> ft. capacity <u>   </u> 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 134</u> Business name <u>Great Bend, Ks.</u> License No. <u>   </u> Address <u>   </u> Signed <u>Fredia Dodson</u> Date <u>4-4</u> Authorized representative				

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

Form WWC-5