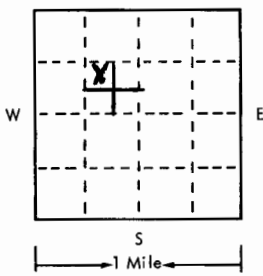
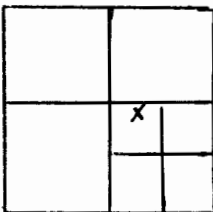


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Grant	Township name Sullivan	Fraction NW 1/4 SE 1/4 NW 1/4	Section number 13	Town number T 29 S	Range number R 38 W		
Distance and direction from nearest town or city: 4 miles west and 3 1/2 south of Ulysses, Kansas Street address of well location if in city:				3 Owner of well: Jay Seyferth Address: Ulysses, Ks. 67880				
Locate with "X" in section below: N  W E S 1 Mile		Sketch map: 		4 Well depth: 270 ft. Date of completion: 3-27-75 Well diameter: 2 1/2 in.				
2 Type and color of material				From	To			
				Sand		0	30	
				Brown clay		30	60	
				Fine sand		60	90	
				Brown clay		90	105	
				Fine sand		105	135	
				Brown sandy clay		135	180	
				Sand		180	195	
				Coarse sand		195	210	
				Brown clay and embedded sand		210	240	
Coarse sand		240	270					
				5 <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				
				6 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"/> Commercial <input type="checkbox"/> Test well				
				7 Casing: Material Styrene Height: above below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 1 1/2 in. Diam. 2 1/2 Weight _____ lbs./ft. _____ _____ in. to _____ ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No 5 in. to 270 ft. depth				
				8 Screen: Jesse & Lowell Manufacturer Jesse & Lowell Type 320 wall Dia. 5" Slot/gauze 1/16 Length _____ Set between 150 ft. and 170 ft. Plain No-230 Fittings: Feip. 230-270 Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material X-2				
				9 Static water level: 55 ft. below land surface Date 3-20-75				
				10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after 1 1/2 hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.				
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____				
				12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade				
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 8 ft. to 20 ft.				
				14 Nearest source of possible contamination: ft. 150 Direction S.E. Type Cerral Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name Gould Model number NA HP 1/2 Volts 230 Length of drop pipe 120 ft. capacity 15 g.m.p. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other				
16 Remarks: elevation				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. Wagner Drlg. 253 Business name _____ License No. _____ Address Ulysses, Ks. 67880 Signed Wagner Date 3-27-75 Authorized representative				
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley								

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

Form WWC-5