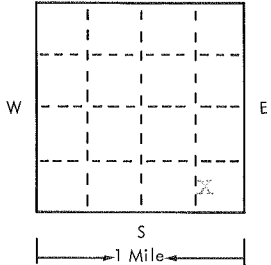


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

1 Location of well:	County <b>Thomas</b>	Township name <b>Rovoh1</b>	Fraction <b>SW 1/4 SE 1/4 SE 1/4</b>	Section number <b>17</b>	Town number <b>7</b>	Range number <b>34</b>
Distance and direction from nearest town or city: <b>4 miles west, 3 miles north of Colby</b> Street address of well location if in city:				3 Owner of well: <b>Moritz Nauer</b> <b>Rt. 3 Box 111</b> Address: <b>Colby, Kansas 67701</b>		
Locate with "X" in section below: N 		Sketch map:		4 Well depth: <b>144</b> ft. Date of completion <b>11/6</b> Well diameter <b>8</b> in.		
2		Type and color of material	From	To	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	
		Top Soil	0	15	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 <input type="checkbox"/>	
		Sand	15	75	7 Casing: Material <b>RMP</b> Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>15</b> in. <b>mnc</b> Diam. _____ Weight _____ lbs./ft. _____ <b>5</b> in. to <b>144</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth	
		Sand Rock	75	86	8 Screen: Manufacturer <b>J &amp; L</b> Type <b>RMP</b> Dia. <b>5"</b> Slot/gauze <b>.032m</b> Length <b>2.5"</b> Set between <b>122</b> ft. and <b>144</b> ft. _____ Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>1/8"</b>	
		Sand	86	140	9 Static water level: <b>25</b> ft. below land surface Date <b>11/6/75</b>	
		Okerand Shale	140	144	10 Pumping level below land surfaces: _____ ft. after <b>NA</b> hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
		<b>BROCK 140'</b>			11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
					12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>20</b> inches above grade <b>mnc</b>	
					13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From <b>18</b> ft. to <b>4</b> ft.	
					14 Nearest source of possible contamination: ft. _____ Direction <b>NA</b> Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Red Jacket</b> Model number <b>14BGP</b> <b>1</b> Volts <b>230</b> Length of drop pipe _____ ft. capacity <b>15</b> 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 <b>3152 (TOPO)</b>		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. <b>Bartell Drilling</b> <b>139</b> Business name _____ License No. _____ Address <b>Winona, Kansas 67761</b> Signed <b>Joe Bartell</b> Date <b>1-5-76</b> Authorized representative				

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

Form WWC-5