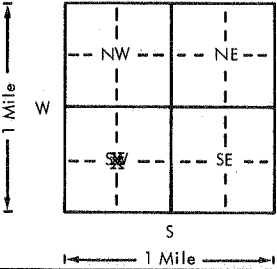


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 <b>Thomas</b>	Fraction <b>SE</b> NW 1/4 <del>NW</del> 1/4 SW 1/4	Section number <b>#17</b>	Township number <b>T 8 S R 34</b>	Range number <b>34</b>
2. Distance and direction from nearest town or city: <b>From Colby, Ks.,</b> <b>2 3/4 miles South &amp; 4 3/4 miles West</b> Street address of well location if in city:				3. Owner of well: <b>Schielke, Ernest</b> R.R. or street: <b>RFD #2</b> City, state, zip code: <b>Colby, Kansas 67701</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>36</u> in. Completion date _____ Well depth <u>214</u> ft. <u>12-4-75</u>		
				7. Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary		
				8. Use: Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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		
5. Type and color of material		From	To	9. Casing: Material <u>concrete</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>17</u> in. to <u>154</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>2 1/2</u> "		
Clay & sand streaks		0	131	10. Screen: Manufacturer's name _____ <u>Kelly Well Co.</u> Type <u>concrete</u> Dia. <u>17</u> " Slot/gauze <u>perforated</u> length <u>60</u> " Set between <u>154</u> ft. and <u>214</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>1/4 x 5/8</u>		
Fine to coarse sand & gravel & clay lenses		131	145	11. Static water level: _____ mo./day/yr. <u>134</u> ft. below land surface Date <u>12-6-75</u>		
Clay		145	148	12. Pumping level below land surfaces: <u>194</u> ft. after <u>2</u> hrs. pumping <u>895</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>900</u> g.p.m.		
Fine to coarse sand & gravel		148	160	13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
Sandy clay		160	181	14. Well head completion: _____ Pitless adapter <u>12</u> inches above grade		
Fine to coarse sand & gravel		181	197	15. Well grouted? <u>yes</u> & <u>clay</u> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
Fine to coarse sand & gravel & clay lenses		197	201	16. Nearest source of possible contamination: ft. <u>200</u> Direction <u>NE</u> Type <u>Farm</u> Well disinfected upon completion? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Fine to coarse sand & gravel		201	214	17. Pump: _____ Not installed Manufacturer's name <u>Floway</u> Model number <u>10</u> DOH HP <u>100</u> Volts <u>480</u> Length of drop pipe <u>208</u> ft. capacity <u>550</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
				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>Western Well &amp; Pump, Inc. 245</u> Business name _____ License No. _____ Address <u>P.O. Box 852, Colby, Ks.</u> Signed <u>Ray F. Senior</u> Date <u>Jan 1</u> Authorized representative		
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		<u>3225 (TOPO)</u> <u>3220</u>				

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

Form WWC-5