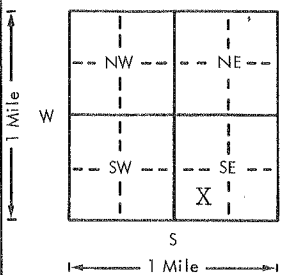


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 1/4 SW 1/4 SE 1/4</b>	Section number <b>28</b>	Township number <b>T 8 S R 34 E/W</b>	Range number
2. Distance and direction from nearest town or city: <b>Well is 4 miles South &amp; 3 1/4 West</b> Street address of well location if in city:			3. Owner of well: <b>Lon Frahm</b> R.R. or street: <b>985 S. Range</b> City, state, zip code: <b>Colby, KS 67701</b>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>30</b> in. Completion date _____ Well depth <b>260</b> ft. <b>9-8-78</b>		
				7. Cable tool _____ Rotary _____ Driven _____ Dug _____ Hollow rod _____ Jetted _____ Bored <input checked="" type="checkbox"/> Reverse rotary		
				8. Use: Domestic _____ Public supply _____ Industry _____ <input checked="" type="checkbox"/> Irrigation _____ Air conditioning _____ Stock _____ Lawn _____ Oil field water _____ Other _____		
5. Type and color of material		From	To	9. Casing: Material <b>steel</b> Height: Above or below _____ Threaded _____ Welded <input checked="" type="checkbox"/> Surface <b>12 1/2</b> in. RMP _____ PVC _____ Weight <b>31.75</b> lbs./ft. Dia. <b>16</b> in. to <b>260</b> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. <b>188</b>		
Med. Gravel		160	186	10. Screen: Manufacturer's name _____ <b>Cook</b> Type <b>Wire Wrapped</b> Dia. <b>16"</b> Slot/gauze <b>100</b> Length <b>20'</b> Set between <b>240</b> ft. and <b>260</b> ft. Perf. <b>Brown</b> ft. and <b>240</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>70% 1/4x5/8</b> 30% #1		
Gravel & Fine Sand		186	215	11. Static water level: _____ mo./day/yr. <b>173</b> ft. below land surface Date <b>9-11-78</b>		
Med. Gravel		215	221	12. Pumping level below land surfaces: <b>234</b> ft. after <b>2</b> hrs. pumping <b>1669</b> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>1669</b> g.p.m.		
Sandstone (Hard)		221	224	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No _____ Date _____		
Fine Sand & Med. Gravel		224	230	14. Well head completion: _____ Pitless adapter <b>12</b> Inches above grade		
Med. Gravel & Gravel (loose)		230	245	15. Well grouted? <b>Yes</b> With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From <b>0</b> ft. to <b>10</b> ft.		
Clay		245	246	16. Nearest source of possible contamination: ft. <b>5600</b> Direction <b>N NW</b> Type <b>Farmstead</b> Well disinfected upon completion? _____ Yes <input checked="" type="checkbox"/> No		
Med. Gravel - Gravel (loose)		246	256	17. Pump: _____ Not installed Manufacturer's name <b>Floway</b> Model number <b>10 DOH</b> HP <b>60</b> Volts _____ Length of drop pipe <b>240</b> ft. capacity <b>650</b> g.p.m. Type: _____ Submersible <input checked="" type="checkbox"/> Turbine _____ _____ Jet _____ Reciprocating _____ _____ Centrifugal _____ Other _____		
Ochre		256	264	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. <b>Western Well &amp; Pump</b> <b>245</b> Business name License No. _____ Address <b>Colby, KS 67701</b> Signed <b>Roy E. Senior</b> Date <b>Oct 13, 1978</b> Authorized representative		
Shale (Blue)		264	270			
BRUCK 256						
18. Elevation:		19. Remarks:				
Topography: _____ Hill _____ Slope <input checked="" type="checkbox"/> Upland _____ Valley						

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

Form WWC-5