

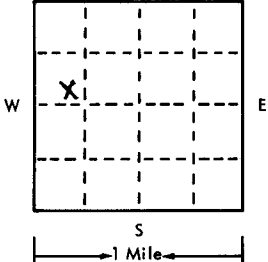
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

13 1 E 24 SW NW
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

Well No. 1 for Abilene dog track

1 Location of well:	County Dickinson	Township name Lincoln	Fraction SW$\frac{1}{4}$, NW$\frac{1}{4}$	Section number 24	Town number T-13-S	Range number R-1-E
Distance and direction from nearest town or city: Street address of well location if in city:				3 Owner of well: Wilfred Witte Address: Abilene, Kansas		
Locate with "X" in section below: N  W X E S 1 Mile				Sketch map: 37' of 8" steel outer casing		
2 Type and color of material				From	To	4 Well depth: 38 ft. Date of completion 8/29/75 Well diameter 8 in.
Sand				0	36	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
Sand and gravel				35	38	6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>
						7 Casing: Material PVC Height: above/below 18 in. Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 18 in. Diam. 5 in. to 38 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 5 in. to 38 ft. depth
						8 Screen: Manufacturer Western Plastics Type R PVC Dia. 5" Slot/gauze 3/32 Length 2 1/2" Set between 34 ft. and 38 ft. Fittings: 1/16 to 3/8" Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____
						9 Static water level: 12 ft. below land surface Date 8/29/75
						10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 24 g.p.m.
						11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
						12 Well head completion: <input type="checkbox"/> Pitless adapter 18 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 ____ ft. to ____ ft.
						14 Nearest source of possible contamination: ft. ____ Direction ____ Type ____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No
						15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity ____ 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)						
16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				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. Rader Drilling Co. 194 Business name License No. _____ Address Carlton, Kans 67429 Signed Brent E Rader Date 9-31-73 Authorized representative		

13 1 E 24 SW NW

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

Form WWC-5