

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

13 2E 85E  
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 <b>Dickinson</b>	Township name <b>Grant</b>	Fraction <b>SE 1/4, SW 1/4</b>	Section number <b>8</b>	Town number <b>T - 13 - S</b>	Range number <b>R - 2 - E</b>	
Distance and direction from nearest town or city: Street address of well location if in city:				3 Owner of well: Address: <b>Frank Wattlelet</b> <b>R.R. #4</b> <b>Abilene, Kansas 67410</b>			
Locate with "X" in section below: N W E S 1 Mile		Sketch map: <i>CDD</i>		4 Well depth: <u>50</u> ft. Date of completion <u>8/9/75</u> Well diameter <u>8</u> 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	
						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 <u>PVC</u> Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. Diam. _____ Weight _____ lbs./ft. _____ <u>5</u> in. to <u>50</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth	
						8 Screen: Manufacturer <u>Western Plastics</u> Type <u>PVC</u> Dia. <u>5</u> " Slot/gauze <u>3/32</u> Length <u>2 1/2</u> " Set between <u>40</u> ft. and <u>50</u> ft. Fittings: _____ Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____	
						9 Static water level: <u>20</u> ft. below land surface Date _____	
						10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>9</u> 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 <input checked="" type="checkbox"/> <u>18</u> 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 <u>0</u> ft. to <u>10</u> 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 type="checkbox"/> Not installed Manufacturer's name <u>Reda</u> Model number <u>51997</u> HP <u>1/2</u> Volts <u>220</u> Length of drop pipe _____ ft. capacity _____ 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  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. <u>Rader Drilling Co. 194</u> Business name _____ License No. _____ Address <u>Carlton, Kans. 67429</u> Signed <u>Brad E. Rader</u> Date <u>9-31-75</u> Authorized representative	

13 2E 8 5E SW