

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

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

10 Acres $5\frac{1}{2}$ $5\frac{1}{2}$ NW $\frac{1}{4}$ SE $\frac{1}{4}$

1 Location of well:	County Osage	Township name Ridgeway	Fraction $\frac{1}{4}$	Section number 36	Town number 14S	Range number 15E
Distance and direction from nearest town or city: 3S Carbondale			3 Owner of well: Elmer Carrier Carbondale, Ks.			
Street address of well location if in city:			Address:			
Locate with "X" in section below:		Sketch map:		4 Well depth: <u>50</u> ft. Date of completion <u>4-6-76</u> Well diameter <u>5"</u> in.		
				5 <input checked="" type="checkbox"/> 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 type="checkbox"/> Reverse rotary		
2 Type and color of material		From	To	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		
Clay yellow		0	17	7 Casing: Material <u>Styrene</u> Height: <u>above</u> Below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. Diam. <u>5</u> in. Weight _____ lbs./ft. _____ to <u>50</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No to _____ ft. depth <u>0.200</u>		
lime Broken		17	20	8 Screen: Manufacturer <u>Field</u> Type <u>Styrene</u> Dia. <u>5"</u> Slot/gauge <u>2/16</u> Length <u>37</u> Set between <u>13</u> ft. and <u>50</u> ft.		
shale		20	24	Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1/8" - 1/4"</u>		
Shale - layer of Brk. lime		24	50	9 Static water level: <u>10</u> ft. below land surface Date <u>4/6/76</u>		
				10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>1 1/2</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 <u>12"</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>12</u> ft.		
				14 Nearest source of possible contamination: ft. <u>100</u> Direction <u>South</u> Type <u>Septic</u> Well disinfected upon completion? <input checked="" 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.m.p. 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		
16 Remarks: elevation				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>Robison Drilling</u> Business name _____ License No. _____ Address <u>Perry Ks.</u> <u>3169</u> Signed <u>Jack Robison</u> Date <u>4/12/76</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		Owner to install slab				

14 15E 36 54 NW SE