

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

1 Location of well:	County Morris	Township name	Fraction sw 1/4 of NW 1/4	Section number 8	Town number T165	Range number R8E				
Distance and direction from nearest town or city: Street address of well location if in city:				3 Owner of well: Wayne Gibson Address: 510 Albert Valley Center						
Locate with "X" in section below: N		Sketch map:		4 Well depth: 135 ft. Date of completion Jan 16 75 Well diameter 6 1/4 in.						
		BCC		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						
				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						
2		Type and color of material		From		To		7 Casing: Material PVC Height: above below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 76 in. Diam. _____ Weight _____ lbs./ft. _____ 5 in. to 72 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth		
								8 Screen: SAW Manufacturer Certain Teed Type PVC Dia. 5 1/2" Slot/gauze 3/16" Length 53' Set between 72 ft. and 135 ft. Fittings: Gravel pack <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material _____		
Flint Gravel				0		1		9 Static water level: Meas. 66 ft. below land surface Date Jan 16 75		
LIME & Flint Chint				1		9		10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 1 g.p.m.		
LIME - Chalk White				9		11		11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
Flint Gravel				11		16		12 Well head completion: <input type="checkbox"/> Pitless adapter 16 <input checked="" type="checkbox"/> Inches above grade		
Shale Yellow				16		20		13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite _____ Depth: From 5 ft. to 16 ft.		
Shale Blue				20		21		14 Nearest source of possible contamination: ft. 50 Direction South D.H. Type Septic Tight Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Red Rock				21		31		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		
Shale-Lite - In Broken Lime Crevice (Dry)				31		40		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. Zinn Water Well Drilling 218 Business name _____ License No. _____ Address Lost Springs, Kan Signed Joseph A. Zinn Date 1/29/75 Authorized representative		
Shale Blue				40		50				
LIME - Grey - Hard				50		55				
Shale Grey				55		61				
LIME Lite				61		62				
Shale Grey 72' Small water 1 gen				62		72				
Red Rock				72		84				
LIME Grey				84		86				
		(use a second sheet if needed)								
16 Remarks: elevation								17 Water well contractor's certification:		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley										

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Continuation of

1 Location of well:	County Morris	Township name	Fraction sw 1/4 of NW 1/4	Section number 8	Town number T16S	Range number R8E
Distance and direction from nearest town or city: Street address of well location if in city:			3 Owner of well: Wayne Gibson 510 Albert Valley Center			
Locate with "X" in section below: N		Sketch map:		4 Well depth: _____ ft. Date of completion _____ Well diameter _____ in.		
				5 <input 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		
				6 Use: <input 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 <input type="checkbox"/>		
				7 Casing: Material _____ Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface _____ in. Diam. _____ Weight _____ lbs./ft. _____ _____ in. to _____ ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth		
2 Type and color of material			From	To	8 Screen: Manufacturer _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ Fittings: Gravel pack <input type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____	
Shale Grey			86	91	9 Static water level: _____ ft. below land surface Date _____	
LIME-Lite Grey-Areal Grindstone			91	100	10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
Shale Blue			100	102	11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____	
LIME-Lite Grey-Grindstone			102	104	12 Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade	
Shale Blue			104	112	13 Well grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From _____ ft. to _____ ft.	
LIME-Lite Grey-Grindstone			112	135	14 Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
(use a second sheet if needed)					15 Pump: <input 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. ZINN Water Well DR16-218 Business name _____ License No. _____ Address West Springs, KS Signed _____ Date 4/20/75 Authorized representative	