

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 Lyon	Township name	Fraction NW$\frac{1}{4}$, SW$\frac{1}{4}$	Section number 14	Town number 18 S	Range number 10 E
Distance and direction from nearest town or city: 1 1/2 mi. SW. of Americus, Ks.			3 Owner of well: Lyon County RWD No. 1 Americus, Kansas Well No. 5-75			
Street address of well location if in city:			Address:			
Locate with "X" in section below: N W E S 1 Mile			Sketch map: <i>CB</i>			4 Well depth: 28.60 ft. Date of completion: 8/21/75 Well diameter 30 in.
2 Type and color of material			From		To	
			Brown clayey silt		0	20
Coarse gravel & large rocks			20	29	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 checked="" type="checkbox"/> Reverse rotary	
					6 Use: <input type="checkbox"/> Domestic <input checked="" 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	
					7 Casing: Material St1 Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 0 in. Diam. 12 in. to 21.60 ft. depth Weight 43.77 lbs./ft. Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
					8 Screen: Manufacturer Cook Type St. St1 Dia. 12" Slot/gauze #70 Length 7' Set between 21.6 ft. and 28.6 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 3/8"	
					9 Static water level: 13.6 ft. below land surface Date 8-21-75	
					10 Pumping level below land surfaces: 21.7 ft. after 5 hrs. pumping 50 g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 40 g.p.m.	
					11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____	
					12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <input type="checkbox"/> 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 5 ft. to 15 ft.	
					14 Nearest source of possible contamination: ft. 250 Direction West Type River Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					15 Pump: <input type="checkbox"/> Not installed Manufacturer's name Jacuzzi Model number 551A10 HP 5 Volts 230 Length of drop pipe 15.90 ft. capacity 40 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 checked="" 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. Layne Western Co. 102 Business name License No. Address Wichita, Kansas Signed <i>[Signature]</i> Date 9/16/75 Authorized representative	