

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 <i>Marion</i>	Township name <i>Center</i>	Fraction <i>SE 1/4 NW 1/4 NW 1/4</i>	Section number <i>10</i>	Town number <i>20S</i>	Range number <i>HE</i>
Distance and direction from nearest town or city:					3 Owner of well <i>Jac. Stewart</i>		
Street address of well location if in city:					Address: <i>Wichita Falls</i>		
Locate with "X" in section below:		Sketch map:			4 Well depth: <i>75</i> ft. Date of completion _____ Well diameter <i>9</i> in.		
		<i>Well at Marion County, Okla</i> <i>SBDC</i>			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	
		<i>Gravel</i>			<i>10</i>		
		<i>Gravel H</i>			<i>20</i>	<i>30</i>	
		<i>Soapstone S</i>			<i>10</i>	<i>40</i>	
		<i>Gravel H</i>			<i>12</i>	<i>52</i>	
		<i>Soapstone Shale S</i>			<i>8</i>	<i>60</i>	
		<i>Red Rock S</i>			<i>8</i>	<i>68</i>	
		<i>Brown Shale S Water</i>			<i>8</i>	<i>75</i>	
		<i>Gravel</i>					
		<i>20 gal/min</i>					
		<i>Pipe cement 22 ft from top</i>					
		(use a second sheet if needed)					
16 Remarks: elevation		Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			9 Static water level: <i>HR</i> 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 _____ 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 <i>12</i> inches above grade		
					13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From _____ ft. to _____ ft.		
					14 Nearest source of possible contamination: ft <i>1000</i> Direction <i>Marion</i> Type <i>Septic</i> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
					15 Pump: <input type="checkbox"/> Not installed Manufacturer's name _____ Model number <i>Y3</i> HP _____ Volts <i>220</i> Length of drop pipe <i>20</i> ft. capacity <i>12</i> 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		
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.					
		<i>Wichita Falls Water Well Co</i> Business name License No. <i>278</i>					
		Address <i>Marion, Okla</i> Authorized representative <i>William Schump</i> Date <i>May 15 1975</i>					