| | 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	Township name	Fraction	Section number	Town number	Range number
Marion	Milton	PT. N½ NW¼	33	22	5

Distance and direction from nearest town or city: ¼ Mile North of Burns, Kans

Street address of well location if in city:

3 Owner of well: Marion Cuffage

Address: Burns, Ks.

Locate with "X" in section below:

Sketch map: N.E. Corner of NW¼   Highway 46 77

4 Well depth: 130 ft. Date of completion _____
Well diameter 10 in.

5 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug
☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary

6 Use: ☒ Domestic ☐ Public supply ☐ Industry
☒ Irrigation ☐ Air conditioning ☐ Commercial
☐ Test well ☐ _____

7 Casing: Material Stee Height: above/below 16 in
Threaded ☐ Welded ☐ Surface _____ in.
Diam. Weight Sc/t. No ft. ___
6 in. to 130 ft. depth Drive shoe? ☐ Yes ☒ No
___ in. to ___ ft. depth

8 Screen:
Manufacturer Out Holt
Type _____ Dia. 6
Slot/gauze _____ Length _____
Set between 90 ft. and _____ ft. 130
Fittings:
Gravel pack ☒ Yes ☐ No Size range of material ___

9 Static water level: 70 ft. below land surface Date Feb 28 1926

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:
☐ Yes ☒ No Date _____

12 Well head completion:
☐ Pitless adapter ☒ 16 in inches above grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐ _____
Depth: From 23 ft. to Top ft.

14 Nearest source of possible contamination:
ft. 300 Direction _____ Type _____
Well disinfected upon completion? ☒ Yes ☐ No

15 Pump: ☐ Not installed
Manufacturer's name _____
Model number _____ HP _____ Volts _____
Length of drop pipe _____ ft. capacity _____ g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Reciprocating
☐ Certrifugal ☐ Other

2

Type and color of material	From	To
Gumbo	0	10
Lime	10	25
Soap Stone Lime ← water 2 gal	20	45
Shale	15	60
Red Rock	15	75
Brown Shale ← Water 25 gal min	20	90
Blue Shale	10	100
Lime	5	105
Blue Shale	6	111
Lime	2	113
Blue Shale	5	118
Lime ← Water 25 gal min	7	125
Shale	5	130

(use a second sheet if needed)

16 Remarks: elevation

Topography:
☐ Hill
☐ Slope
☒ Upland
☐ 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.

Wm Schmpf Water well 278
Business name _____ License No.
Address Marion
Signed William Schmpf Date March
Authorized representative

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5

677-H