

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

WATER WELL RECORD
KSA 82a-1201-1215

23 1 E 3 SW SE E
T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:		County HARVEY	Township name NEWTON	Fraction SW SE SE	Section number 3	Town number T 23S	Range number R 1E
Distance and direction from nearest town or city: 2W 3S of Walton					3 Owner of well: GENE PRICE		
Street address of well location if in city: _____					Address: RR # 4, NEWTON, Ks.		
Locate with "X" in section below: N		Sketch map:		4 Well depth: <u>71</u> ft. Date of completion <u>4-10-75</u> Well diameter <u>7" in to 9"</u>			
				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 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 checked="" type="checkbox"/> <u>LIVESTOCK</u>	
		BLACK TOP SOIL		top	3	7 Casing: Material RMP Height: <u>above</u> /below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. Diam. <u>5"</u> Weight <u>200</u> lbs./ft. <u>5</u> in. to <u>71</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		GRAY CLAY		3	9	8 Screen: <u>Sunflower</u> Manufacturer <u>Sunflower</u> Type <u>RMP</u> Dia. <u>5"</u> <u>Slot</u> gauze <u>3/32</u> Length <u>3/32 47/64</u> Set between <u>21</u> ft. and <u>65</u> ft. Fittings: <u>1/4" to 1/2"</u> Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____	
		BROWN sand		9	15	9 Static water level: <u>12</u> ft. below land surface Date <u>4-10-75</u>	
		BLUE SHALE		15	35	10 Pumping level below land surfaces: <u>18</u> ft. after <u>1</u> hrs. pumping <u>6</u> g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <u>8</u> g.p.m.	
		White Rock		35	36	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
		BLUE SHALE		36	71	12 Well head completion: <u>Hand pump & w. windmill</u> <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade <u>10"</u>	
						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>top</u> ft. to <u>10</u> ft.	
						14 Nearest source of possible contamination: ft. <u>1/2 mile</u> Direction <u>WEST</u> Type <u>Basins</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
						15 Pump: <u>Hand pump</u> <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		(use a second sheet if needed)		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>FRANK BUDDE 221 A</u> Business name _____ License No. _____ Address <u>RR #4, NEWTON, Ks.</u> Signed <u>Frank Budde</u> Date <u>9-16-75</u> Authorized representative			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley							

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