

1 Location of well:	County <b>BUTLER</b>	Township name <b>BRUNO</b>	Fraction <b>NW 1/4 SE 1/4 SW 1/4</b>	Section number <b>5</b>	Town number <b>275</b>	Range number <b>36</b>		
Distance and direction from nearest town or city: <b>1 mi NO 1/2 mi EAST ANDOVER on 215th St</b>			3 Owner of well: <b>DUANE CREEK MORE</b>					
Street address of well location if in city: <b>FORTNEY ADD</b>			Address: <b>RT 4 WICHITA KS</b>					
Locate with "X" in section below:			Sketch map:					
4 Well depth:	<b>74</b>		ft. Date of completion <b>5-28-77</b>		Well diameter <b>8</b> in.			
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							
7 Casing:	Material <b>RMP</b>		Height: <b>above</b> below		Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in.			
Diam.	<b>6</b> in. to <b>54</b> ft. depth		Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Weight</b> <b>15</b> lbs./ft.			
<b>in. to</b> <b>ft. depth</b>		<b>in. to</b> <b>ft. depth</b>						
8 Screen:	Manufacturer <b>Simplex</b> Type <b>RMP</b> Dia. <b>60</b> Slot/gauge <b>10</b> Length <b>20 ft</b> Set between <b>54</b> ft. and <b>74</b> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____							
9 Static water level:	<b>42</b> ft. below land surface Date <b>5-29-76</b>							
10 Pumping level below land surfaces:	ft. after _____ hrs. pumping _____ g.p.m. ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>20</b> g.p.m.							
11 Water sample submitted:	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____							
12 Well head completion:	<b>CAPED</b> <input type="checkbox"/> Pitless adapter <b>12</b> 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 <b>3</b> ft. to <b>15</b> ft.							
14 Nearest source of possible contamination:	ft. <b>80</b> Direction <b>EAST</b> Type <b>Septic</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
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							
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. <b>Branson Drilling</b> Business name _____ License No. _____ Address <b>102 CENT AV ANDOVER</b> Signed <b>Branson Drilling</b> Date <b>5-28-76</b> Authorized representative _____							
(use a second sheet if needed)								