

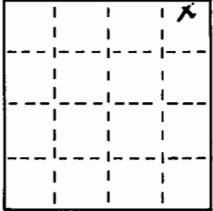
USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

N $\frac{1}{2}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$

1 Location of well:		County Butler	Township name Bruno	Fraction NE $\frac{1}{4}$ NE $\frac{1}{4}$	Section number 12	Town number T 27 S	Range number R 3 E
Distance and direction from nearest town or city: 3 west 3 north Augusta Kans				3 Owner of well: Tony Nester Address: Towanda Kansas			
Locate with "X" in section below: N  W E S 1 Mile				Sketch map:			
2				4 Well depth: 70 ft. Date of completion 5-8-1975 Well diameter 7 in.			
Type and color of material				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			
Red Clay				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 <input type="checkbox"/>			
grey soft lime				7 Casing: Material stylene height: above below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 18 in. Diam. 10 in. to 10 ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No 7 in. to 70 ft. depth			
yellow rock				8 Screen: sunflower plastic inc Manufacturer Wichita Kans Type RMP Dia. 6 Slot/gauze 1/4 Length 20 ft Set between 50 ft. and 70 ft. Fittings: Gravel pack <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material			
Blue shale				9 Static water level: 35 ft. below land surface Date 5-8-1975			
yellow rock				10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 20 ft g.p.m.			
Water				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date			
yellow rock				12 Well head completion: <input type="checkbox"/> Pitless adapter 18 inches above grade			
owner will put on slab				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 10 ft. to 0 ft.			
(use a second sheet if needed)				14 Nearest source of possible contamination: ft. 500 Direction east Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
16 Remarks: elevation				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			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" 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. Murray Wike 122 Business name License No. Address Augusta, Kans Signed Murray Wike Date 5-8-1975 Authorized representative			