

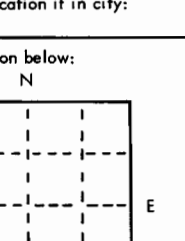
USE TYPEWRITER OR BALL
POINT PEN—PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82g-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

SW 1/4 SW NWNW

1 Location of well:	County Butler	Township name Bruno	Fraction <i>NW 1/4</i> NW 1/4	Section number 23	Town number 27	Range number R 3E
Distance and direction from nearest town or city: 3 east Andover Kans			3 Owner of well: Marvin J Gutzmer Address: 800.6 Levitt Wichita Kans			
Locate with "X" in section below: <div style="text-align:center;">N </div>			Sketch map:			
2 Type and color of material			From		To	
Red Clay			0		5	
grey lime			5		10	
yellow clay			10		30	
Blue shale			30		40	
grey lime			40		50	
water			50			
grey lime			50		60	
owner will put on slab						
(use a second sheet if needed)						
16 Remarks: elevation			4 Well depth: 60 ft. Date of completion Aug Well diameter 7 in.			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley			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 <input type="checkbox"/>			
			7 Casing: Material stagnant Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. Diam. 10 Weight 1.5 lbs./ft. 7 in. to 10 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 7 in. to 60 ft. depth			
			8 Screen: Sunflower plastic Manufacturer Wichita K Type RPM Dia. 6" <input checked="" type="checkbox"/> Slotted Length 20 ft Set between 40 ft. and 60 ft. Fittings: Gravel pack <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material _____			
			9 Static water level: 35 ft. below land surface Date Aug 11, 19			
			10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 20+ 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 <input checked="" type="checkbox"/> 12 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 10 ft. to 0 ft.			
			14 Nearest source of possible contamination: ft. 600 Direction north Type septic 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			
			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 License No. _____ Business name Augusta Ks. Address Wichita Signed Murray Wike Date Aug Authorized representative			

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

Form WWC-5