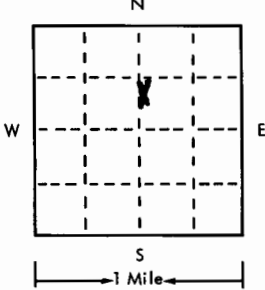


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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

| | | | | | | |
|--|-------------------------|-------------------------------|---|--|---------------------------|---|
| 1 Location of well: | County Butler | Township name Bruno | Fraction NW 1/4 SW 1/4 NE 1/4 | Section number 23 | Town number 27s | Range number 3E |
| Distance and direction from nearest town or city: 1/2 mile East of Augusta, Kansas Airport on Central | | | | 3 Owner of well: Mel Trammel R#2 Box 251-74 Derby, Kansas 67037 | | |
| Locate with "X" in section below:  | | | | 4 Well depth: 150 ft. Date of completion 4-27-75 Well diameter 11 in. | | |
| 2 Type and color of material | | | | 5 <input type="checkbox"/> Cable tool <input checked="" 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 Styrene Height: above/below 12 in. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> Dia. 5 in. Weight 150 lbs./ft. 5 in. to 150 ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | | 8 Screen: Sunflower Plastic Manufacturer Styrene Dia. 5" Type 005 Length 85' Slot/gauze 65 ft. and 150 ft. Set between 65 ft. and 150 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1-1/8" | | |
| Dirt and Top Soil | | | | From | To | 9 Static water level: 60 ft. below land surface Date 4-27-75 |
| Clay | | | | 0 | 2 | 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. |
| Rock | | | | 2 | 6 | 11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date ____ |
| Shale | | | | 6 | 60 | 12 Well head completion: <input type="checkbox"/> Pitless adapter 12 <input checked="" type="checkbox"/> Inches above grade |
| Shale | | | | 60 | 95 | 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 0 ft. to 12 ft. |
| Rock | | | | 95 | 115 | 14 Nearest source of possible contamination: ft. 60 Direction SW Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Shale (Blue) | | | | 115 | 150 | 15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.p.m. 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 |
| (use a second sheet if needed) | | | | | | |
| 16 Remarks: elevation Flat Ground | | | | | | |
| 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. Harp Well & Pump 236 Business name Wichita, Kansas License No. 67209 Address Wichita, Kansas Signed M. Arnold Date 4-28-75 Authorized representative | | | | | | |

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

Form WWC-5