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WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County <i>Butler</i>	Fraction <i>1/4 NE 1/4 SW 1/4</i>	Section number <i>23</i>	Township number <i>T 27 S R 3 0</i>	Range number <i>SW</i>
2. Distance and direction from nearest town or city:	<i>1/2 mile N.</i>		3. Owner of well: R.R. or street: <i>George Bros. R. L. 1</i>	<i>Augusta, Kansas</i>	
Street address of well location if in city:	<i>Augusta Airport</i>		City, state, zip code:		
4. Locate with "X" in section below:	Sketch map: 				
5. Type and color of material	From <i>0</i>	To <i>2</i>			
	<i>Clay</i>	<i>2</i>			
	<i>Shale</i>	<i>10</i>			
		<i>10</i>	<i>125</i>	Dia. <i>5</i> in. to <i>125</i> ft. depth Wall thickness: inches or Dia. <i>5</i> in. to <i>ft.</i> depth gage No. <i>200</i>	
				10. Screen: Manufacturer's name <i>Surfleur Plastic</i>	
				Type <i>Stainless</i> dia. <i>5 1/2</i> "	
				Slot gauze <i>0.030</i> Length <i>75'</i>	
				Set between <i>50</i> ft. and <i>125</i> ft.	
				Gravel pack <i>3/8</i> " Size range of material <i>1/4 - 1/2</i> "	
				11. Static water level: mo./day/yr. <i>50</i> ft. below land surface Date <i>9-30-75</i>	
				12. 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.	
				13. Water sample submitted: mo./day/yr. Yes _____ No _____ Date _____	
				14. Well head completion: <i>X</i> Pitless adapter <i>12</i> inches above grade	
				15. Well grouted? <i>yes</i> With: <i>Neat cement</i> <i>Bentonite</i> <i>X</i> Concrete Depth: From <i>40</i> ft. to <i>14</i> ft.	
				16. Nearest source of possible contamination: ft. <i>150</i> Direction <i>N.W.</i> Type <i>Septic tank</i> Well disinfected upon completion? <i>X</i> Yes _____ No _____	
				17. Pump: Manufacturer's name <i>Surfleur</i> Not installed Model number <i>P6D2</i> HP <i>1/4</i> Volts <i>230</i> Length of drop pipe <i>110</i> ft. capacity <i>20</i> g.p.m. Type: <i>X</i> Submersible _____ Turbine _____ ____ Jet _____ Reciprocating _____ ____ Centrifugal _____ Other _____	
(Use a second sheet if needed)			18. Elevation: Topography: <i>X</i> Hill <i>—</i> Slope <i>—</i> Upland <i>—</i> Valley		
19. Remarks:			20. 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. <i>Harold Well & Pump Co. Inc.</i> Business name <i>Midwest</i> License No. <i>330</i> Address <i>1020 1/2 Main Street, Wichita, Kansas</i> Signed <i>M. Arnold</i> Date <i>10-2-75</i> Authorized representative		