

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

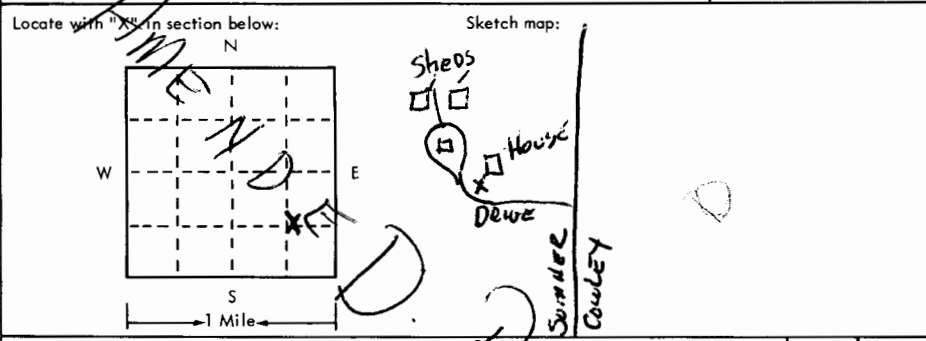
T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well: County SUMNER Township name _____ Fraction SE 1/4 Section number 24 Town number T 33 S Range number R 26

Distance and direction from nearest town or city: 2 MI SOUTH 1 MI EAST OXFORD
Street address of well location if in city: _____
3 Owner of well: DALE HUTCHINS
Address: RFD #1 OXFORD KS



4 Well depth: 59 ft. Date of completion 4/10/75
Well diameter 10 in.
5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored Reverse rotary
6 Use: Domestic Public supply Industry
 Irrigation Air conditioning Commercial
 Test well _____
7 Casing: Material RMP Height: above/below
Threaded Welded Surface in wall
Diam. 6 in. to 59 ft. depth Weight 200 lb/ft.
Drive shoe? Yes No
6 in. to 59 ft. depth

2	Type and color of material	From	To
	SOIL BLK TO RED	0	4
	CLAY RED	4	15
	SAND MED TO FINE GRAIN	15	25
	SHALE (SOFT) WHT. TO GRAY	25	30
	SHALE & LM SHELLS BLU TO WHT.	30	35
	BEKH LM. TAN (WATER IN BOTTOM)	35	48
	8' LOST CIRC ZONE & FORMATION CAVING	45	48
	SHALE BLUE	48	56
	BEKH LM. TAN TO WHT	56	59
	TOTAL DEPTH	59	
(use a second sheet if needed)			

8 Screen: JESS & LOWELL
Manufacturer _____
Type SLOTTED RMP Dia. 6
Slot/gauze 1/2 Length 10
Set between 49 ft. and 59 ft.
Fittings:
Gravel pack Yes No Size range of material 3/4
9 Static water level: 45 ft. below land surface Date 4/10/75
10 Pumping level below land surfaces: BAIL TEST
____ ft. after ____ hrs. pumping ____ g.p.m.
____ ft. after ____ hrs. pumping ____ g.p.m.
Estimated maximum yield 20-30 g.p.m.
11 Water sample submitted:
 Yes No Date _____
12 Well head completion:
 Pitless adapter 12 inches above grade
13 Well grouted? Yes No
 Neat cement Bentonite _____
Depth: From 0 ft. to 19 ft.
14 Nearest source of possible contamination:
ft 200 Direction NE Type SEPTIC
Well disinfected upon completion? Yes No
15 Pump: Not installed
Manufacturer's name _____
Model number _____ HP _____ Volts _____
Length of drop pipe _____ ft. capacity _____ g.m.p.
Type:
 Submersible Turbine
 Jet Reciprocating
 Centrifugal Other

16 Remarks: elevation OWNER TO CONSTRUCT SLAB & WELL HOUSE
OWNER WILL PLUG ABANDONED WELL UPON
COMPLETION OF NEW CONSTRUCTION AND INSTALLATION
OF NEW PUMPING EQUIPMENT
Topography:
 Hill
 Slope
 Upland
 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.
GTS DRILLING 171
Business name _____ License No. _____
Address 208 E 19th
Signed [Signature] Date 7/13/75
Authorized representative