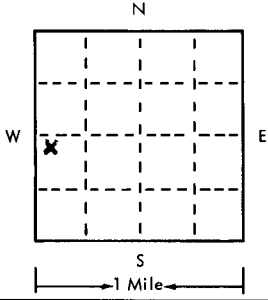
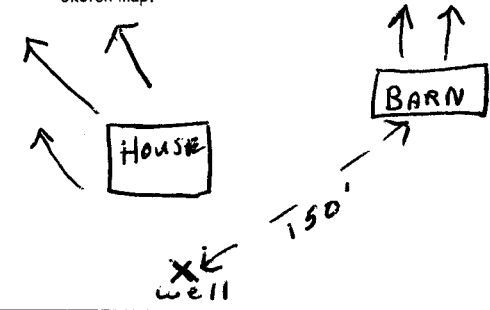


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 <u>Doniphan</u>	Township name <u>NW 1/4 SW 1/4</u>	Fraction <u>23</u>	Section number <u>4</u>	Town number <u>19</u>	Range number <u>23</u>
Distance and direction from nearest town or city: <u>35</u>			3 Owner of well: <u>John Folley</u>			
Street address of well location if in city: <u>Denton, Kansas</u>			Address: <u>RFD 1 Denton, Kansas</u>			
Locate with "X" in section below:		Sketch map:		4 Well depth: <u>60</u> ft. Date of completion: <u>9-4-75</u> Well diameter <u>12</u> in.		
				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		
2 Type and color of material		From To		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 <u>PVC</u> Height: above/below Threading <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in. Diam. <u>5</u> in. to <u>60</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth		
				8 Screen: Manufacturer <u>Pump Co</u> Type <u>PVC</u> Dia. <u>5"</u> Slot <u>.025</u> Length <u>10'</u> Set between <u>40</u> ft. and <u>50</u> ft. Fittings: <u>.025 to .080</u> Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____		
				9 Static water level: <u>NOT MEASURED</u> <u>29</u> ft. below land surface Date <u>9-4-75</u> MNC		
				10 Pumping level below land surfaces: <u>AIR TEST</u> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>8</u> g.p.m.		
11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		12 Well head completion: <u>capped</u> <input checked="" type="checkbox"/> Pitless adapter <u>24</u> <input checked="" type="checkbox"/> 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 <u>0</u> ft. to <u>10</u> ft.		
14 Nearest source of possible contamination: <u>BARN</u> ft. <u>150</u> Direction <u>N.E.</u> Type <u>yard</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Incu 721</u> Model number <u>554B</u> HP <u>1/2</u> Volts <u>230</u> Length of drop pipe <u>50</u> ft. capacity <u>10</u> 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		16 Remarks: elevation <u>1030</u> well slab by owner Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input 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. <u>Strader Drilg Co Inc</u> <u>182</u> Business name License No. Address <u>RFD 1 Holton - KS</u> Signed <u>Dale Baker</u> Date <u>9-8-75</u> Authorized representative						