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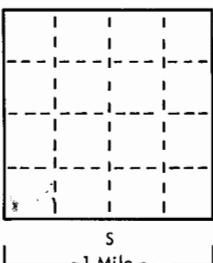
USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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

DCCC

1 Location of well:	County JACKSON	Township name Lincoln	Fraction SW¹/₄ - SW¹/₄	Section number 5	Town number 95	Range number 15 E
Distance and direction from nearest town or city: 3 N - 3 W				3 Owner of well: Alfred Lee		
Street address of well location if in city: 1404T KS				Address: RFD 1 HOYT, Kansas		
Locate with "X" in section below:		Sketch map:		4 Well depth: <u>50</u> ft. Date of completion <u>10-6-75</u> Well diameter <u>10</u> in.		
<p>N</p>  <p>S</p> <p>W E</p> <p>← 1 Mile →</p>		<p>100</p> <p>X 150</p>		<input type="checkbox"/> Cable tool <input checked="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="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 Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>2 1/2</u> in. Diam. Weight <u>2.35</u> lbs./ft. _____ <u>5</u> in. to <u>50</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="checked" type="checkbox"/> No ____ in. to ____ ft. depth		
				8 Screen: Manufacturer <u>Pumpco</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauge <u>.080</u> Length <u>10</u> Set between <u>10</u> ft. and <u>20</u> ft. _____ Fittings: Gravel pack <input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>4/8"</u>		
2 Type and color of material	From		To	9 Static water level: <u>NOT MEASURED</u> <u>12</u> ft. below land surface Date <u>10-6-75 MNC</u>		
<u>TOP SOIL</u>	<u>0 4</u>		<u>4</u>	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>5</u> g.p.m.		
<u>YELLOW CLAY</u>	<u>4 10</u>		<u>10</u>	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="checked" type="checkbox"/> No Date _____		
<u>SAND & GRAVEL</u>	<u>10 13</u>		<u>13</u>	12 Well head completion: <u>Capped</u> <input type="checkbox"/> Pitless adapter <u>24</u> <input checked="checked" type="checkbox"/> Inches above grade		
<u>Blue shale</u>	<u>13 50</u>		<u>50</u>	13 Well grouted? <input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="checked" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From <u>0</u> ft. to <u>7</u> ft.		
				14 Nearest source of possible contamination: ft. <u>300</u> Direction <u>S</u> Type <u>5 Tank</u> Well disinfected upon completion? <input checked="checked" type="checkbox"/> Yes <input type="checkbox"/> No		
				15 Pump: <input checked="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		
16 Remarks: elevation <u>1060</u> Owner will install slab.	(use a second sheet if needed)			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 DRILLING CO INC 182</u> Business name _____ License No. _____ Address <u>RFD 1 HOYT KS</u> Signed <u>Dale Cochran</u> Date <u>10-6-75</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="checked" type="checkbox"/> Valley						

9 15E S SW SW SW SW