

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 <i>Ottawa</i>	Township name	Fraction <i>C 5 1/2</i> <i>NW 1/4</i>	Section number <i>27</i>	Town number <i>T 12 S</i>	Range number <i>R 4 W</i>
Distance and direction from nearest town or city: Street address of well location if in city: <i>IN. QUIVER</i>				3 Owner of well: <i>Vernon Peterson</i> Address: <i>Box 41 Salina, Kans</i>			
Locate with "X" in section below: N W — X — E S 1 Mile		Sketch map:		4 Well depth: <i>42</i> ft. Date of completion <i>1-24-78</i> Well diameter <i>8</i> 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	
				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 <i>PVC</i> Height: <i>above</i> below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <i>12</i> in. Diam. _____ Weight _____ lbs./ft. _____ <i>5</i> in. to <i>32</i> ft. depth! Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth!	
2		Type and color of material		From	To	8 Screen: Manufacturer <i>Ours NPE</i> Type <i>drilled PVC</i> Dia. <i>5"</i> Slot/gauze <i>1/8"</i> Length <i>10'</i> Set between <i>32</i> ft. and <i>42</i> ft. <i>1 1/8-3/4"</i> Fittings: _____ Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <i>20-7</i>	
		<i>Clay</i>		<i>0</i>	<i>27</i>	9 Static water level: <i>14</i> ft. below land surface Date _____	
		<i>Sand-Gravel</i>		<i>27</i>	<i>40</i>	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.	
		<i>Shale</i>		<i>40</i>	<i>42</i>	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
						12 Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade <i>12"</i>	
						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 <i>0</i> ft. to <i>10</i> ft.	
						14 Nearest source of possible contamination: <i>Sewer</i> ft. <i>400</i> Direction <i>West</i> Type <i>line</i> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
						15 Pump: <input 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						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. <i>Kelly's Water Well Serv 186</i> Business name License No. _____ Address <i>Rt 2 Ave at Bend</i> Signed <i>Kelly Price</i> Date <i>1-28-78</i> Authorized representative	
		Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		(use a second sheet if needed)			