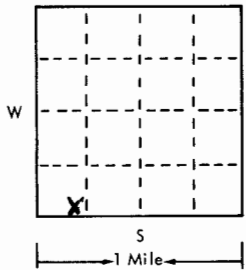


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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>Saline</u>	Township name	Fraction <u>SE SW SW</u>	Section number <u>33</u>	Town number <u>135</u>	Range number <u>1W</u>
Distance and direction from nearest town or city: <u>3 miles E New Cambria</u>				3 Owner of well: <u>Jack Imler</u>		
Street address of well location if in city:				Address: <u>Saline Home</u>		
Locate with "X" in section below: N  W S E 1 Mile				Sketch map:		
2 Type and color of material				From	To	
<u>Clay, gray + buff</u>				<u>0</u>	<u>17</u>	
<u>Sand, fine</u>				<u>17</u>	<u>17.5</u>	
<u>Silt, buff</u>				<u>17.5</u>	<u>20</u>	
<u>Sand, fine to coarse</u>				<u>20</u>	<u>22</u>	
<u>Gravel fine to medium + sand</u>				<u>22</u>	<u>25</u>	
<u>Clay buff</u>				<u>25</u>	<u>25.5</u>	
<u>Gravel, medium to fine</u>				<u>25.5</u>	<u>35</u>	
<u>Field drop count tests:</u>						
<u>Cl - 450 ppm</u>						
<u>Total hardness 171 ppm</u>						
<u>Iron + Mg - 0.9 ppm</u>						
(use a second sheet if needed)						
16 Remarks: elevation				17 Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Hydronic Drilling</u> <u>126</u> Business name License No. Address <u>Saline Mo</u> Signed <u>Ort Fort</u> Date <u>5-14-75</u> Authorized representative		