

TREGO CENTER NE

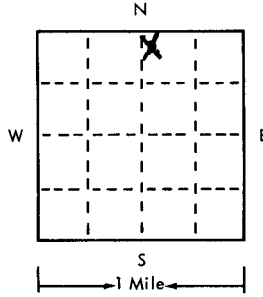
T R EW sec 1/4 1/4 1/4 No.

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

WATER WELL RECORD
KSA 82a-1201-1215

ABS

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

1 Location of well:	County Trego	Township name Ogallah	Fraction NE 1/4	Section number 10	Town number 13	Range number 22	
Distance and direction from nearest town or city: 3 1/2 miles S of Ogallah Ra			3 Owner of well: Darel Rubin Address: RR#2 Ellis Kansas				
Locate with "X" in section below: 			Sketch map:			4 Well depth: 53 ft. Date of completion 7-28-75 Well diameter 10 in.	
2 Type and color of material			From To		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		
Black dirt			0 20		7 Casing: Material Plastic Weight: above below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. Diam. Collars Weight _____ lbs./ft. Collars _____ in. to _____ ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 5 in. to 39 ft. depth: 200-8-35-4		
Dirt mixed with grey sand			20 30		8 Screen: Jess-Lowell Manufacturer Type Plastic Dia. 5" Slot gauge _____ Length 15 Set between 39 ft. and 53 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____		
Red clay with Red sand Terra Co			30 52		9 Static water level: 34 ft. below land surface Date 7-28-75		
Shale			52 53		10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 10 g.p.m.		
BRUCK 52'					11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
52 34 18' sat thick			2305 2305 2305		12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter 10 inches above grade		
18' sat thick in Og.					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 5 ft. to 15 ft.		
					14 Nearest source of possible contamination: ft. 500 Direction N.W Type Lawer 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 checked="" 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. Lurea Water Well Drilling Business name _____ License No. _____ Address: 503 mouse _____ Signed: John Lurea _____ Date 7-28-75 Authorized representative _____		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley			2305 (TOP)				

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5