

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>Salina</i>	Township name <i>SE 1/4 NE NW</i>	Fraction	Section number <i>13</i>	Town number <i>13S</i>	Range number <i>3W</i>																														
Distance and direction from nearest town or city:				3 Owner of well: <i>Charles Howison</i>																																
Street address of well location if in city:				Address: <i>451 S. 5<sup>th</sup> Salina</i>																																
Locate with "X" in section below:		Sketch map:		4 Well depth: <i>54</i> ft. Date of completion <i>6-4-75</i> Well diameter <i>4</i> in.																																
N W ——— E S 1 Mile		<i>BAD</i>		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																																
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">2 Type and color of material</th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td><i>Callisaurus</i></td> <td></td> <td></td> </tr> <tr> <td><i>Clay, sandy, tan</i></td> <td><i>0</i></td> <td><i>5</i></td> </tr> <tr> <td><i>Basins fine</i></td> <td></td> <td></td> </tr> <tr> <td><i>Sandstone, fine to medium, yellow</i></td> <td><i>5</i></td> <td><i>26</i></td> </tr> <tr> <td><i>Shale, gray</i></td> <td><i>26</i></td> <td><i>39</i></td> </tr> <tr> <td><i>Sandstone, medium, yellow</i></td> <td><i>39</i></td> <td><i>47</i></td> </tr> <tr> <td><i>Shale, gray</i></td> <td><i>47</i></td> <td><i>49</i></td> </tr> <tr> <td><i>Sandstone, fine, white, interbedded with shale, gray</i></td> <td><i>49</i></td> <td><i>54 1/2</i></td> </tr> <tr> <td><i>Sandstone, very hard, calcareous</i></td> <td><i>54 1/2</i></td> <td><i>54 1/2</i></td> </tr> </tbody> </table>				2 Type and color of material	From	To	<i>Callisaurus</i>			<i>Clay, sandy, tan</i>	<i>0</i>	<i>5</i>	<i>Basins fine</i>			<i>Sandstone, fine to medium, yellow</i>	<i>5</i>	<i>26</i>	<i>Shale, gray</i>	<i>26</i>	<i>39</i>	<i>Sandstone, medium, yellow</i>	<i>39</i>	<i>47</i>	<i>Shale, gray</i>	<i>47</i>	<i>49</i>	<i>Sandstone, fine, white, interbedded with shale, gray</i>	<i>49</i>	<i>54 1/2</i>	<i>Sandstone, very hard, calcareous</i>	<i>54 1/2</i>	<i>54 1/2</i>	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"/>		
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			7 Casing: Material <i>RMP</i> Height: <i>above</i> /below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <i>12</i> in. Diam. <i>4</i> in. to <i>54</i> ft. depth! Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>4</i> in. to <i>54</i> ft. depth!																																	
			8 Screen: Manufacturer <i>Shop</i> Type <i>RMP</i> Dia. <i>4"</i> Slot/gauze <i>3/32</i> Length _____ Set between <i>25</i> ft. and <i>54</i> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <i>1/4"</i>																																	
			9 Static water level: <i>25</i> ft. below land surface Date <i>6-4-75</i>																																	
			10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping <i>5</i> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <i>10</i> g.p.m.																																	
			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																																	
			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>3</i> ft. to <i>13</i> ft.																																	
			14 Nearest source of possible contamination: ft. _____ Direction _____ Type _____ 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:																																
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <i>Mechanica Drilling 126</i> Business name _____ License No. _____ Address <i>Salina</i> Signed <i>O. J. [unclear]</i> Date <i>7-25-75</i> Authorized representative																																

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

Form WWC-5