

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

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

1. Location of well:		County <b>Saline</b>	Fraction <b>NW 1/4 SE 1/4 NE 1/4</b>	Section number <b>22</b>	Township number <b>T 13 S R 5 E</b>	Range number <b>5</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: <b>Ernest Gustafson</b> R.R. or street: <b>RT. 1</b> City, state, zip code: <b>Smolan, Kansas</b>			
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. <b>6</b> in. Completion date: <b>10-5-75</b> Well depth <b>60</b> ft.	
		<b>H D B</b>			7. <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	
5. Type and color of material					8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
					9. Casing: Material <b>RMP</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>26</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>4</b> in. to <b>44</b> ft. depth, Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth, gage No. <b>25</b>	
					10. Screen: Manufacturer's name <b>SHOP</b> Type <b>RMP</b> Dia. <b>4</b> Slot/gauze <b>3/32</b> Length <b>11</b> Set between <b>44</b> ft. and <b>50</b> ft. <b>55</b> ft. and <b>60</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/4-1/2</b>	
					11. Static water level: <input type="checkbox"/> mo./day/yr. <b>15.5</b> ft. below land surface Date <b>10-5-75</b>	
					12. Pumping level below land surfaces: <b>27</b> ft. after <b>1/2</b> hrs. pumping <b>15</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <b>20</b> g.p.m. Estimated maximum yield <b>20</b> g.p.m.	
					13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <input type="checkbox"/>	
					14. Well head completion: <input type="checkbox"/> Pitless adapter <b>26</b> inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.	
					16. Nearest source of possible contamination: ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> g.p.m. 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	
		(Use a second sheet if needed)				
18. Elevation:		19. Remarks:			20. 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. <b>Hydraulic Drilling Co 126</b> Business name License No. <input type="checkbox"/> Address <b>RT 2 Salina KS</b> Signed <b>Ed Faust</b> Date <b>11-14-75</b> Authorized representative	
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

T 13 S R 5 E Sec 22 NW 1/4 SE 1/4