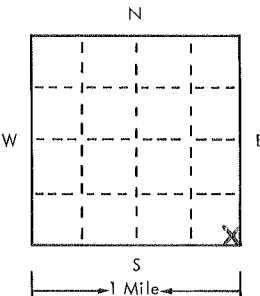


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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>SESESE</u>	Section number <u>7</u>	Town number <u>14S</u>	Range number <u>3W</u>	
Distance and direction from nearest town or city:			3 Owner of well: <u>Grant Robison</u>				
Street address of well location if in city:			Address: <u>Rt. 1 Salina Kans</u>				
Locate with "X" in section below: 			Sketch map: <u>Ft. below LS</u>			4 Well depth: <u>50</u> ft. Date of completion <u>8-28-75</u> Well diameter <u>4</u> 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
<u>Alluvium:</u> <u>Clay, buff & gray</u> <u>Gravel fine & sand, silty</u> <u>Wellington fm</u> <u>Shale, blue-gray</u>			34 <u>0</u> <u>34</u> <u>34</u> <u>50</u>		7 Casing: Material <u>RMP</u> Height: <u>above</u> below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. Diam. <u>4</u> in. to <u>50</u> ft. depth Weight <u>4</u> lbs./ft. to <u>50</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No		
							8 Screen: Manufacturer <u>Slup</u> Type <u>RMP</u> Dia. <u>4"</u> Slot/gauze <u>1/16</u> Length <u>4'</u> Set between <u>46</u> ft. and <u>50</u> ft. Fittings: <u>2.5 mm</u> Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material
							9 Static water level: <u>15.5</u> ft. below land surface Date <u>8-28-75</u>
							10 Pumping level below land surfaces: <u>30</u> ft. after <u>42</u> hrs. pumping <u>20</u> g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <u>30</u> 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 <u>3</u> ft. to <u>13</u> ft.
							14 Nearest source of possible contamination: ft. ____ Direction ____ Type ____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
(use a second sheet if needed)							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 Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley
							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. <u>Hephraeie Dullin</u> <u>126</u> Business name License No. Address <u>Salina, KS</u> Signed <u>Asst. Forst</u> Date <u>9-10-75</u> Authorized representative