

WESKAN SE

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

CCS

1 Location of well:	County <b>WALLACE</b>	Township name <b>SHARON SPRINGS 5S 14W 1/4</b>	Fraction <b>21</b>	Section number <b>21</b>	Town number <b>T14S</b>	Range number <b>R40W</b>
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Distance and direction from nearest town or city:  
**SHARON SPRINGS 5S - 1/4W**

Street address of well location if in city:

3 Owner of well: **NORMAN REISS**

Address: **MCADDE KANSAS**

Locate with "X" in section below:

Sketch map:

4 Well depth: **228** ft. Date of completion **3-25-75**  
Well diameter **26** in.

5  Cable tool  Rotary  Driven  Dug  
 Hollow rod  Jetted  Bored  Reverse rotary

6 Use:  Domestic  Public supply  Industry  
 Irrigation  Air conditioning  Commercial  
 Test well

7 Casing: Material **STEEL** Height: above/below  
Threaded  Welded  Surface **12** in.  
Diam. **14** in. to **158** ft. depth Weight **33** lbs./ft. **L**  
Drive shoe?  Yes  No

2	Type and color of material	From	To
	GRAVEL	120	146
	M GRAVEL, SANDSTONE	146	164
	GRAVEL	164	168
	CLAY	168	171
	FINE SAND, M GRAVEL	171	191
	M GRAVEL	191	221
	SANDY CLAY	221	224
	SHALE	224	228
	BRUCK 224'		

8 Screen:  
Manufacturer **W.A. BROWN**  
Type **BUVER** Dia. **16**  
Slot/gauze **1/8 - 7** Length **10**  
Set between **158** ft. and **228** ft.  
Fittings:  
Gravel pack  Yes  No Size range of material **4/16 - 1/8**

9 Static water level:  
**142** ft. below land surface Date **3-25-75**

10 Pumping level below land surfaces:  
**180** ft. after **5** hrs. pumping **1:50** p.m.  
\_\_\_\_ ft. after \_\_\_\_ hrs. pumping \_\_\_\_ g.p.m.  
Estimated maximum yield **2000** g.p.m.

11 Water sample submitted:  
 Yes  No Date \_\_\_\_\_

12 Well head completion:  
 Pitless adapter  Inches above grade

13 Well grouted?  Yes  No  
 Neat cement  Bentonite   
Depth: From **0** ft. to **10** ft.

14 Nearest source of possible contamination:  
ft. \_\_\_\_\_ Direction \_\_\_\_\_ Type **NONE**  
Well disinfected upon completion?  Yes  No

15 Pump:  Not installed  
Manufacturer's name **Western Land Rollo**  
Model number **107** HP **1.25** Volts \_\_\_\_\_  
Length of drop pipe **210** ft. capacity \_\_\_\_ g.m.p.  
Type:  
 Submersible  Turbine  
 Jet  Reciprocating  
 Centrifugal  Other

16 Remarks: elevation **3688 (TOPO)**

Topography:  
 Hill  
 Slope  
 Upland  
 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.  
**A.H. Dullong Co. Inc. 166**  
Business name License No. \_\_\_\_\_  
Address **Lawrence, Kansas**  
Signed **Bill Clifford** Date **4-1-75**  
Authorized representative