

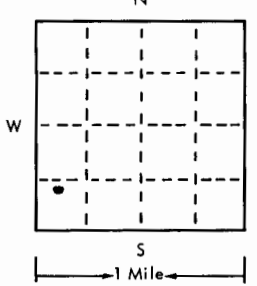
USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

NW SW SW

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>Lot 3</u> <u>SW 1/4</u>	Section number: <u>4</u>	Town number: <u>T155</u>	Range number: <u>R2 W</u>
Distance and direction from nearest town or city: <u>3E-2 1/2 mi to Bath</u>			3 Owner of well: <u>Richard Hickum</u>			
Street address of well location if in city: <u>Salina Kans.</u>			Address: <u>1441 Franklin Salina Kans.</u>			
Locate with "X" in section below: N  W S 1 Mile			Sketch map:			4 Well depth: <u>35</u> ft. Date of completion: <u>4-9-75</u> Well diameter: <u>8</u> in. <u>4-10-75</u>
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
			<u>Top soil</u>	<u>0</u>	<u>18"</u>	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>Red Sandstone</u>	<u>18"</u>	<u>30</u>	7 Casing: Material <u>PVC</u> Height above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. Diam. _____ Weight _____ lbs./ft. _____ <u>5</u> in. to <u>30</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth
			<u>Iron Pyrites</u>	<u>30</u>	<u>32</u>	8 Screen: Manufacturer <u>Optim Steel</u> Type <u>P.C.</u> Dia. <u>5</u> in. Slot/gauze <u>1/2</u> Length <u>10 ft</u> Set between <u>25</u> ft. and <u>30</u> ft. Fittings: _____ Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____
			<u>Blue shale</u>	<u>32</u>	<u>35</u>	9 Static water level: <u>7</u> ft. below land surface Date <u>4-10-75</u>
						10 Pumping level below land surfaces: <u>12</u> ft. after <u>1 1/2</u> hrs. pumping <u>15</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>25</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 <u>12</u> 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>0</u> ft. to <u>12</u> ft.
						14 Nearest source of possible contamination: ft. <u>150</u> Direction <u>SW</u> Type <u>Sept.</u> 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: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Peterson Bros Inc</u> <u>138</u> Business name License No. Address <u>Box 150 Lindsayburg Kans</u> Signed <u>Wally Peterson</u> Date <u>4-10-75</u> <u>By T.P.</u> Authorized representative			
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley			(use a second sheet if needed)			