

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<br><b>BARTON</b> | Township name<br><b>CITY EDIN<br/>BLOCK 2</b> | X Fraction<br><b>NW</b>              | X Section number?<br><b>13</b> | X Town number<br><b>17S</b>  | X Range number<br><b>12W</b> |
| Distance and direction from nearest town or city:   |                         |   | 3 Owner of well: <b>EINA PROSSER</b> |                                |  |                              |
| Street address of well location if in city:   |                         |   | Address: <b>EDIN, KANS.</b>          |                                |  |                              |
| Locate with "X" in section below:   |                         |   | Sketch map:                          |                                | 4 Well depth: <b>84</b> ft. Date of completion: <b>2-17-77</b><br>Well diameter <b>7</b> in.   |                              |
|   |                         |   |                                      |                                | 5 <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary  |                              |
|   |                         |   |                                      |                                | 6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial<br><input type="checkbox"/> Test well <input type="checkbox"/> <b>HOUSE</b>   |                              |
| 2   |                         |   | Type and color of material           |                                | 7 Casing: Material <b>PVC</b> Height: above/below<br>Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>18</b> in.<br>Dia. _____ Weight _____ lbs./ft. _____<br><b>5</b> in. to <b>84</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>_____ in. to _____ ft. depth  |                              |
|   |                         |   |                                      |                                | 8 Screen: Manufacturer <b>Modern pipe inc</b><br>Type <b>PVC # 200</b> Dia. <b>5"</b><br>Slot/gauze <b>1/16</b> Length <b>20</b><br>Set between <b>84</b> ft. and <b>64</b> ft. _____<br>Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>1/8</b>   |                              |
|   |                         |   |                                      |                                | 9 Static water level: <b>12</b> ft. below land surface Date <b>2-14-77</b>   |                              |
|   |                         |   |                                      |                                | 10 Pumping level below land surfaces: <b>bailer test</b><br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>Estimated maximum yield <b>12</b> g.p.m.   |                              |
|   |                         |   |                                      |                                | 11 Water sample submitted:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____   |                              |
|   |                         |   |                                      |                                | 12 Well head completion:<br><input checked="" type="checkbox"/> Pitless adapter <b>18</b> inches above grade   |                              |
|   |                         |   |                                      |                                | 13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____<br>Depth: From <b>64</b> ft. to <b>84</b> ft.  |                              |
|   |                         |   |                                      |                                | 14 Nearest source of possible contamination: <b>septic tank</b><br>ft. <b>50</b> Direction <b>E</b> Type <b>septic tank</b><br>Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |                              |
|   |                         |   |                                      |                                | 15 Pump: <input type="checkbox"/> Not installed<br>Manufacturer's name <b>F &amp; W</b><br>Model number <b>3BA6</b> HP <b>1/3</b> Volts <b>230</b><br>Length of drop pipe _____ ft. capacity <b>10</b> g.m.p.<br>Type:<br><input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |                              |
|   |                         |   |                                      |                                | 16 Remarks: elevation  |                              |
| Topography:<br><input type="checkbox"/> Hill<br><input checked="" type="checkbox"/> Slope<br><input type="checkbox"/> Upland<br><input type="checkbox"/> Valley |                         |   |                                      |                                | 17 Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.<br><b>SMALL'S WATER WELL DRILLING</b><br>Business name _____ License No. _____<br>Address <b>25 SO. KS. RUSSELL</b><br>Signed <b>Edum Small</b> 1977<br>Authorized representative   |                              |

17S 12W NW