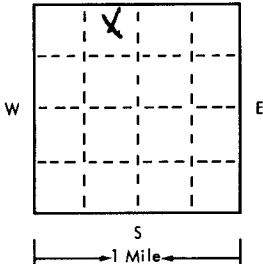


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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

| | | | | | | |
|---|----------------------------|-------------------------------|---|------------------------------|---|---|
| 1 Location of well: | County McPherson | Township name NE NW | Fraction 20 | Section number 175 | Town number 3 W | Range number |
| Distance and direction from nearest town or city: 1/2 S | | | 3 Owner of well: Red Tiger Drilling Co. | | | |
| Street address of well location if in city: Lindsborg, Kan. | | | Address: 1720 Wichita Plaza Wichita, Kans. | | | |
| Locate with "X" in section below: N  W E S 1 Mile | | | Sketch map: | | | 4 Well depth: 90 ft. Date of completion 5-16-75 Well diameter 7 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 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 <input checked="" type="checkbox"/> Oil Rig Supply | |
| Top Soil - Clay | | | 0 | 30 | 7 Casing: Material PVC Height: above below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. Diam. _____ Weight _____ lbs./ft. _____ 4 in. to 90 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth | |
| Sand - Gravel - Clay Strks | | | 30 | 90 | 8 Screen: Manufacturer M.P.I. Type PVC Dio. 4 Slot/gauze 1/2" Length 20' Set between 70 ft. and 90 ft. _____ Fittings: 1/2" 3/4" Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____ | |
| | | | | | 9 Static water level: 26 ft. below land surface Date 5-16-75 | |
| | | | | | 10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 100 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"/> 12 Inches above grade | |
| | | | | | 13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 0 ft. to 10 ft. | |
| | | | | | 14 Nearest source of possible contamination: oil ft. 100 Direction S Type Test Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" 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. Kelly's Water Well Serv 186 Business name _____ License No. _____ Address R 2 Great Bend, KS Signed Kelly Price Date 5-20-75 Authorized representative | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley | | | | | | |

17 3 W 20 NE NW