

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

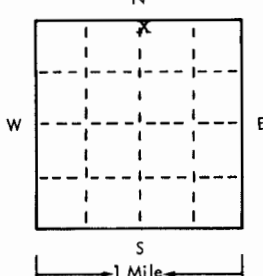
PENSE SW

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

ABB

1 Location of well:	County Wichita	Township name Edwards NW-NE	Fraction 1/4-1/4-NE	Section number 7	Town number 17	Range number 35		
Distance and direction from nearest town or city: 8N, 1/2W of			3 Owner of well: Jack Burch					
Street address of well location if in city: Marienthal, KS			Address: Marienthal, KS 67863					
Locate with "X" in section below: N  W E S 1 Mile			Sketch map:			4 Well depth: 95 ft. Date of completion 8-14-75 Well diameter 9 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			
			Clay		0	27	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 <input type="checkbox"/>	
			Sd coarse		27	35	7 Casing: Material Plas Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. Diam. 1.8 lbs./ft. 5 in. to 25 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
			Fine sd		35	49	8 Screen: Manufacturer Jess & Lowell Type Plastic Dia. 5 Slot/gauze _____ Length _____ Set between 75 ft. and 95 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material #1	
			Fine sd clay		49	55	9 Static water level: 32 ft. below land surface Date 8-14-75	
			Fine sd		55	77	10 Pumping level below land surfaces: NA ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.	
			Clay		77	84	11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____	
			Sd coarse		84	93	12 Well head completion: NA <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade	
			Clay		93	95	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 0 ft. to 15 ft.	
			Shale		95		14 Nearest source of possible contamination: ft. 200 Direction N Type Septic 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 3134 (TOPO) Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input 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. Weishaar Drilling 232 Business name License No. Address Scott City, KS 67871 Signed <i>[Signature]</i> Date 9-11-75 Authorized representative		