

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 Wichita | Township name Edwards | Fraction SW 1/4 | Section number 31 | Town number 17 | Range number 35 |
| Distance and direction from nearest town or city: 2 1/2 N 1 W | | | | 3 Owner of well: Jerome Wimmer | | |
| Street address of well location if in city: of Marienthal, Ks | | | | Address: Marienthal, Kansas | | |
| Locate with "X" in section below: N W X E S 1 Mile | | | Sketch map: | | | 4 Well depth: 207 ft. Date of completion _____ Well diameter 16 in. 3-29-76 |
| 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 checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> _____ | |
| Soil 0 20 Clay 20 40 Fine sand 40 50 Gyp 50 87 sandy clay 87 126 Fine sand 126 140 Fine sand 140 163 Yellow clay 163 182 Fine To Med sand 182 200 Yellow clay 200 205 Shale 205 | | | | | 7 Casing: Material steel Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. Dig. _____ Weight _____ lbs./ft. _____ 16 in. to 167 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth | |
| | | | | | 8 Screen: Manufacturer W.A. Brown Type _____ Dia. 16" Slot/gauze _____ Length 40' Set between 167 ft. and 207 ft. _____ Fittings: _____ 1/4 - 5/8 Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____ | |
| | | | | | 9 Static water level: 148 ft. below land surface Date 3-10-76 | |
| | | | | | 10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ 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 type="checkbox"/> 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 0 ft. to 10 ft. | |
| | | | | | 14 Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input 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 checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other | |
| | | | | | 16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input 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. WHINERY DRILLING 256 Business name _____ License No. _____ Address 405 Antelope Scott City, Ks. Signed John Whinery Date 7-21-76 Authorized representative | |

17 35W 31 SW