

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 <u>McPherson</u>	Township name <u>Marquette</u>	Fraction <u>SW 1/4 - SE 1/4</u>	Section number <u>24</u>	Town number <u>T175</u>	Range number <u>R-5-N</u>
Distance and direction from nearest town or city: <u>1/2 E Marquette</u>			3 Owner of well: <u>George Simmons</u>			
Street address of well location if in city:			Address: <u>Marquette, Kans.</u>			
Locate with "X" in section below:		Sketch map:		4 Well depth: <u>51</u> ft. Date of completion <u>4-18-75</u> Well diameter <u>8"</u> in.		
				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		
2		Type and color of material		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"/>		
				7 Casing: Material <u>PVC</u> Height: <u>above</u> below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. Diam. <u>5</u> in. to <u>51</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No <u>5</u> in. to <u>51</u> ft. depth		
				8 Screen: <u>Certain Lead</u> Manufacturer <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>1/32</u> Length <u>10ft</u> Set between <u>44</u> ft. and <u>51</u> ft. Fittings: <u>1/2 - 1/2"</u> Gravel pack <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material <u> </u>		
				9 Static water level: <u>17</u> ft. below land surface Date <u>4-18-75</u>		
				10 Pumping level below land surfaces: <u>21</u> ft. after <u>12</u> hrs. pumping <u>15</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>30</u> g.p.m.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>		
				12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>18"</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>5</u> ft. to <u>5</u> ft.		
				14 Nearest source of possible contamination: <u>link drain</u> ft. <u>30</u> Direction <u>SW</u> Type <u>link drain</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 <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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		(use a second sheet if needed)		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>Alton Bros Inc # 138</u> Business name <u>Bot 150</u> License No. <u> </u> Address <u> </u> Signed <u> </u> Date <u>5-13-75</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5