

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

Location of well:	County <u>Wichita</u>	Township name <u>Leoti</u>	Fraction <u>NW<math>\frac{1}{4}</math>SW<math>\frac{1}{4}</math>SW<math>\frac{1}{4}</math></u>	Section number <u>22</u>	Town number <u>18</u>	Range number <u>37</u>
Distance and direction from nearest town or city: <u>2.5 W 3/4 S</u>			3 Owner of well: <u>George Evans</u> Address: <u>Leoti, Kansas</u>			
Street address of well location if in city: <u>of Leoti, Kansas</u>						
Locate with "X" in section below: N		Sketch map: 				
		4 Well depth: <u>182</u> ft. Date of completion <u>2-13-76</u> Well diameter <u>12 1/2</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				
		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				
		7 Casing: Material <u>Steel</u> Height: <u>above</u> <u>below</u> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. Diam. <u>12</u> in. to <u>142</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No <u>139</u> in. to <u>142</u> ft. depth				
		8 Screen: Manufacturer <u>W.A. Brown</u> Type <u>Steel</u> Dia. <u>12</u> Slot/gauze <u>10%</u> Length <u>40</u> Set between <u>142</u> ft. and <u>182</u> ft.				
		9 Static water level: <u>140</u> ft. below land surface Date <u>2-13-76</u>				
		10 Pumping level below land surfaces: <u>142</u> ft. after <u>0</u> hrs. pumping <u>0</u> g.p.m. <u>162</u> ft. after <u>0</u> hrs. pumping <u>0</u> g.p.m. Estimated maximum yield <u>200</u> g.p.m.				
		11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u>2-13-76</u>				
		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 <u>0</u> ft. to <u>10</u> ft.				
		14 Nearest source of possible contamination: ft. <u>0</u> Direction <u>W</u> Type <u>Soil</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
		15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Valley</u> Model number <u>30</u> HP Volts <u>200</u> Length of drop pipe <u>170</u> ft. capacity <u>200</u> g.p.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. <u>WHITNEY DRILLING</u> <u>256</u> Business name <u>405 Antelope</u> License No. <u>K5555</u> Address <u>Scott City</u> Signed <u>John Whitney</u> Date <u>7-22-80</u> Authorized representative				

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

Form WWC-5