

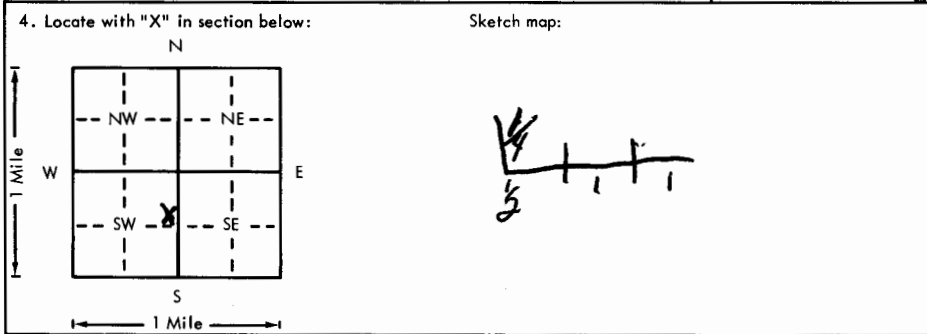
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

1. Location of well: County **McPherson** Fraction **SE 1/4 NE 1/4 SW 1/4** Section number **19** Township number **19** Range number **1 West**

2. Distance and direction from nearest town or city: **2 1/2 west of center** Owner of well: **Blackstone Drilling Co.**
Street address of well location if in city: **1/2 N in field** R.R. or street: **523 W. Kans. McPherson**
City, state, zip code: **67460**



6. Bore hole dia. **6** in. Completion date **10-19-79**
Well depth **75** ft.

7. Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored Reverse rotary

8. Use: Domestic Public supply Industry
 Irrigation Air conditioning Stock
 Lawn Oil field water Other

9. Casing: Material **3"** Height: Above or below
Threaded Welded Surface **18** in.
RMP PVC Weight **200** lb./ft.
Dia. **3** in. to **0** ft. depth Wall Thickness: inches or
Dia. **3** in. to **55** ft. depth gage No. **216**

5. Type and color of material	From	To
Brown Clay	0	5
Light Brown Clay	5	20
Good Gravel	21	45
Medium Gravel	46	73
Blue Clay	73	75
		20
		55

10. Screen: Manufacturer's name **Certain terol**
Type **sawed** Dia. **3**
Slot/gauze **1/16** Length **20'**
Set between **65** ft. and **75** ft.
Gravel pack **yes** Size range of material **1/8 x 1/4** ft.

11. Static water level: **22** mo./day/yr.
0-879 below land surface Date **22**

12. Pumping level below land surfaces:
26 ft. after **1** hrs. pumping **25** g.p.m.
ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield **25** g.p.m.

13. Water sample submitted: mo./day/yr.
 Yes No Date _____

14. Well head completion: **18** Inches above grade
 Pitless adapter

15. Well grouted? **yes**
With: Neat cement Bentonite Concrete
Depth: From **0** ft. to **10** ft.

16. Nearest source of possible contamination:
ft. _____ Direction **none** Type _____
Well disinfected upon completion? Yes No

17. Pump: Not installed
Manufacturer's name _____
Model number _____ HP _____ Volts _____
Length of drop pipe _____ ft. capacity _____ g.p.m.
Type:
 Submersible Turbine
 Jet Reciprocating
 Centrifugal Other

18. Elevation: Topography: Hill Slope Upland Valley

19. Remarks: (Use a second sheet if needed)

20. 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.
Rosencrantz-Bemis Ent. Inc. 134
Business name License No. _____
Address **211 W. 4th Hutch. Kans.**
Signed **Mike Flawes** Date **10-29-79**
Authorized representative

19 1-19 SE 1/4 SW