

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

1 Location of well:	County Rice	Township name C NW 1/4	Fraction 27	Section number 195	Town number 10 W	Range number
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Distance and direction from nearest town or city: 8 N.W. Chase,	3 Owner of well: Red Tiger Drilling Co.
Street address of well location if in city: KANS.	Address: 1720 Wichita Plaza Wichita, Kans

Locate with "X" in section below:

Sketch map:

Rig # 3
Mapco, Bernstacy?

4 Well depth: **35** ft. Date of completion **2-2-75**
Well diameter **5 3/4** in.

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored Reverse rotary

6 Use: Domestic Public supply Industry
 Irrigation Air conditioning Commercial
 Test well **Oil Rig**

7 Casing: Material **PI** Height: above/below
Threaded Welded Surface **12** in.
Diam. _____ Weight _____ lbs./ft. _____
2 in. to **35** ft. depth Drive shoe? Yes No
_____ in. to _____ ft. depth

2	Type and color of material	From	To
	Top Soil - clay	0	20
	Sand + Gravel	20	35

8 Screen:
Manufacturer **Used**
Type **Slot** Dia. **2"**
Slot/gauze **1/4"** Length **15"**
Set between **20** ft. and **35** ft. _____
Fittings: **1/8" - 3/4"**
Gravel pack Yes No Size range of material _____

Received reply from Robert A. Yancey on 4/23/75 that their Company plugged this water well according to 28-30-7 Abandonment Regulations 1, 2 + 3 4/24/75 - SWB

(use a second sheet if needed)

9 Static water level:
14 ft. below land surface Date **2-2-75**

10 Pumping level below land surfaces:
_____ ft. after _____ hrs. pumping _____ g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield **60** g.p.m.

11 Water sample submitted:
 Yes No Date _____

12 Well head completion: **12**
 Pitless adapter Inches above grade

13 Well grouted? Yes No
 Neat cement Bentonite _____
Depth: From _____ ft. to **10** ft.

14 Nearest source of possible contamination: **oil**
ft. **75** Direction **SW** Type **Test**
Well disinfected upon completion? Yes No

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

16 Remarks: elevation

Topography:
 Hill
 Slope
 Upland
 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.
Billy's Water Well Serv 186
Business name _____ License No. _____
Address **1720 Great Bend, Kans**
Signed **Billy Price** Date **2-10-75**
Authorized representative