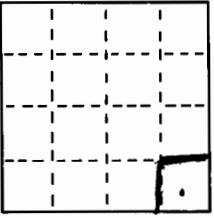
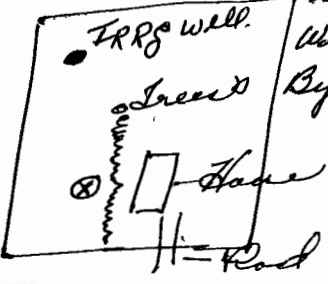


T		R		EW		sec	1/4	1/4	1/4	No.

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

County <b>McPherson</b>	Township name <b>Canton</b>	Fraction <b>SE 1/4 SE 1/4</b>	Section number <b>23</b>	Town number <b>19</b>	Range number <b>2 W</b>
Distance and direction from nearest town or city: <b>1 W - 2 S 1/4 West</b> Street address of well location if in city: <b>7 Canton Kans.</b>			3 Owner of well: <b>Ellenwood Kachner</b> Address: <b>R.R. 2 Canton Kans.</b>		
Locate with "X" in section below:		Sketch map:			
N  W                  E S 1 Mile					
2 Type and color of material			From	To	
<b>Top Soil</b>			<b>0</b>	<b>4</b>	
<b>Sandy Clay</b>			<b>4</b>	<b>19</b>	
<b>Dry fine sands &amp; clay</b>			<b>19</b>	<b>32</b>	
<b>Buff clay &amp; lime rock</b>			<b>32</b>	<b>50</b>	
<b>Tight fine to med sand &amp; lime</b>			<b>50</b>	<b>60</b>	
<b>Very fine to med fine sand</b>			<b>60</b>	<b>86</b>	
<b>Med sand &amp; gravel - loose</b>			<b>86</b>	<b>98</b>	
<b>Green Shale</b>			<b>98</b>	<b>102</b>	
(use a second sheet if needed)					
16 Remarks: elevation  <b>Well Area flat ground</b> <b>Road slopes East away from</b> <b>House and yard area.</b>					
4 Well depth: <b>100</b> ft. Date of completion: <b>5-18</b> Well diameter <b>8"</b> 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 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 <b>PCC</b> Height above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>18"</b> in. Diam. <b>5 1/4"</b> Weight _____ lbs./ft. <b>5</b> in. to <b>100</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth					
8 Screen: Manufacturer <b>Curtain Feed</b> Type <b>PCC</b> Dia. <b>5"</b> Slot gauge <b>Y32</b> Length <b>10 feet</b> Set between <b>90</b> ft. and <b>100</b> ft. Fittings: _____ Gravel pack <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material _____					
9 Static water level: <b>31</b> ft. below land surface Date <b>5-20-75</b>					
10 Pumping level below land surfaces: <b>35</b> ft. after <b>2</b> hrs. pumping <b>15</b> g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <b>30-40</b> g.p.m.					
11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____					
12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>18"</b> 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 _____ Depth: From <b>94</b> ft. to <b>14</b> ft.					
14 Nearest source of possible contamination: ft. <b>500</b> Direction <b>East</b> Type <b>Sept</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. 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					
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. <b>P. J. Hester</b> License No. <b>1503</b> Business name _____ Address <b>Box 150, McPherson, KS</b> Signed <b>P. J. Hester</b> Date <b>5-20-75</b> Authorized representative					