

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

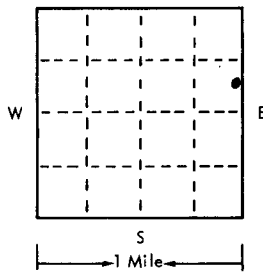
SHALLOW WATER

19 33 W 3 2 A D A
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

ADA

1 Location of well:	County SCOTT	Township name	Fraction NE-SE-NE	Section number 32	Town number 19S	Range number 33W			
Distance and direction from nearest town or city: 8S, 4W, 1/4S of C of Scott City				3 Owner of well: T.R. Kaufman Address: Route #3 Scott City, KS. 67871					
Locate with "X" in section below: N 		Sketch map:		4 Well depth: 176 ft. Date of completion 6-20-75 Well diameter: 2 7/8 in.					
2 Type and color of material				From		To			
				soil		0		15	
				clay		15		27	
				fine sand		27		57	
				sand with clay		57		70	
				coarse sand with clay		70		90	
				fine sand with clay		90		100	
				coarse sand with clay		100		120	
				sand		120		133	
				sand with clay and gyp.		133		137	
sand with clay and gyp.		137		140					
sand with clay		140		172					
yellow		172		175					
blue		175		176					
BROCK 172'									
(use a second sheet if needed)									
16 Remarks: elevation 2981 (TOP)				8 Screen: Manufacturer Jess & Lowell Type ABS Dia. 5" I.D. Slot gauge 110 Length 20' Set between 15 1/2 ft. and 17 1/2 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 5/8 down					
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				9 Static water level: 90 ft. below land surface Date 5-30-75					
				10 Pumping level below land surfaces: 170 ft. after 2 hrs. pumping 15 g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 20 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 unit <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 0 ft. to 20 ft.					
				14 Nearest source of possible contamination: septic ft. 300 Direction East Type leak Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name Goulds Model number TE10101 Volts 230 Length of drop pipe 160 ft. capacity 10 g.p.m. Type: <input checked="" 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. ABC Drilling Co. 246 Business name License No. _____ Address Scott City, KS. 67871 Signed Deel Nottingham Date 7-3-75 Authorized representative					