

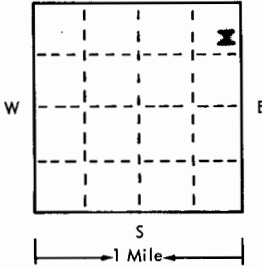
USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

SE NENE

| | | | | | | |
|---|----------------------------|---------------------------------|---|-----------------------------|---|------------------------------|
| 1 Location of well: | County McPherson | Township name Jackson | Fraction E 1/2 of NE 1/4 | Section number 32 | Town number 19 - S | Range number 4 - W |
| Distance and direction from nearest town or city: 1/2 mi. S & 1/2 mi. E of Conway, Kansas Street address of well location if in city: | | | 3 Owner of well: Maud Beattie Address: McPherson, Kansas | | | |
| Locate with "X" in section below: N  W S 1 Mile | | | 4 Well depth: 55 ft. Date of completion 7-31 Well diameter 12 in. 5 <input checked="" type="checkbox"/> Cable tool <input 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 PVC Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface _____ in. Diam. _____ Weight _____ lbs./ft. _____ 8 in. to 55 ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth | | | |
| 2 Type and color of material | | | From | To | 8 Screen: Manufacturer _____ Type PVC Dia. 8" Slot/gauze 1/8 Length 2 in. Set between 36 ft. and 55 ft. perforation Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/2 | |
| Loam | | | 0 | 6 | 9 Static water level: 27 ft. below land surface Date 8-12-76 | |
| Clay | | | 6 | 16 | 10 Pumping level below land surfaces: 44 ft. after 1 hrs. pumping 5 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 5 g.p.m. | |
| Shale Red | | | 16 | 55 | 11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____ | |
| Water vein at | | | 42 | | 12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter 24 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 3 ft. to 13 ft. | |
| | | | | | 14 Nearest source of possible contamination: ft. 150 Direction NE Type Lateral Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | 15 Pump: yes <input type="checkbox"/> Not installed Manufacturer's name Flint & Walling Model number 3BA6 HP 1/3 Volts 115 Length of drop pipe 17 ft. capacity 10 g.m.p. 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 | |
| 16 Remarks: elevation | | | 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. Beattie Water Well Service Business name _____ License No. _____ Address Conway, Kansas Signed Faye Beattie Date 8-14-76 Authorized representative | | | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley | | | | | | |

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