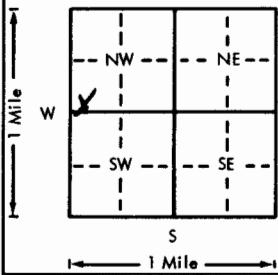


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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	Fraction	Section number	Township number	Range number	
Wichita		SW 1/4 SW 1/4 NW 1/4	8	T 20	S R 35 EW	
2. Distance and direction from nearest town or city:	10 $\frac{1}{2}$ S of		3. Owner of well:	Alex Holstein		
Street address of well location if in city:	Marienthal, Kansas		R.R. or street:	RFD #2		
4. Locate with "X" in section below:	Sketch map:		6. Bore hole dia.	9 in. Completion date _____		
		<p>Sketch map:</p> <p>well 20' → Feed Lot</p>		Well depth	115 ft. 7-29-76	
5. Type and color of material	From	To	7. 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		
Clay	0	15	8. Use:	<input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
Sd coarse	15	21	9. Casing: Material	<input type="checkbox"/> Plas. <input type="checkbox"/> Height: Above or below <input type="checkbox"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Clue <input type="checkbox"/> Surface 12 in. <input checked="" type="checkbox"/> RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight 1.8 lbs./ft. <input type="checkbox"/> Dia. 5 in. to 95 ft. depth <input type="checkbox"/> Wall Thickness: inches or <input type="checkbox"/> Dia. in. to ft. depth <input type="checkbox"/> gage No. 250		
Clay	21	25	10. Screen: Manufacturer's name	Jess & Lowell		
Sd med	25	30	Type	<input checked="" type="checkbox"/> RMP <input type="checkbox"/> Dia. 5 in. <input type="checkbox"/> Slot gauze <input type="checkbox"/> 1/16 <input type="checkbox"/> Length 20 ft. <input type="checkbox"/> Set between 95 ft. and 115 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. <input type="checkbox"/> Gravel pack yes <input type="checkbox"/> Size range of material 1/8		
Clay	30	45	11. Static water level:	mo./day/yr. 88 ft. below land surface Date 7-29-76		
Sd coarse	45	107	12. Pumping level below land surfaces:	NA		
Clay yellow	107	110	ft. after hrs. pumping g.p.m.			
Shale	111	115	ft. after hrs. pumping g.p.m.			
(Use a second sheet if needed)			Estimated maximum yield	g.p.m.		
18. Elevation:	19. Remarks:					14. Well head completion:
Topography:						<input type="checkbox"/> Pitless adapter <input type="checkbox"/> 12 inches above grade
<input type="checkbox"/> Hill						15. Well grouted? <input checked="" type="checkbox"/> yes
<input type="checkbox"/> Slope						With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete
<input checked="" type="checkbox"/> Upland						Depth: From 0 ft. to 15 ft.
<input type="checkbox"/> Valley						16. Nearest source of possible contamination: Feed
						ft. 20 Direction E Type Lot
						Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						17. 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
						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. Weishaar Drilling 232 Business name _____ License No. _____ Address 10021 1/2 St. Gtto. KS 67871 Signature _____ Date _____ Authorized Representative 8-17-76