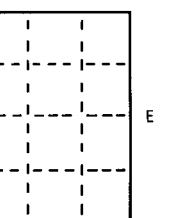


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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

| | | | | | | |
|---|---------------------------|-------------------------------|-------------------------------------|---|----------------------------|-----------------------------|
| 1 Location of well: | County Stafford | Township name Byron | Fraction CNWA₄ | Section number 15 | Town number T21S | Range number R12W |
| Distance and direction from nearest town or city: 9½ mi. North of Hudson, Kansas Street address of well location if in city: | | | | 3 Owner of well: Stan Christianson Address: Hudson, Kansas | | |
| Locate with "X" in section below: <div style="text-align:center;">N  S 1 Mile</div> | | | | Sketch map: | | |
| 2 Type and color of material | | | | From | To | |
| | | | | | | |
| Sandy top soil | | | | 0 | 4 | |
| Sandy clay | | | | 4 | 26 | |
| Sand & sandy clay | | | | 26 | 42 | |
| Sand & gravel | | | | 42 | 60 | |
| Sandy clay | | | | 60 | 71 | |
| Sand & gravel | | | | 71 | 81 | |
| Brown clay | | | | 81 | 83 | |
| SAND & gravel | | | | 83 | 115 | |
| (use a second sheet if needed) | | | | | | |
| 16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | | | | 4 Well depth: 115 ft. Date of completion 5-19-75 Well diameter 24 in. | | |
| | | | | 5 <input 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 checked="" type="checkbox"/> Reverse rotary | | |
| | | | | 6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> | | |
| | | | | 7 Casing: Material Steel Height: above below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. Diam. _____ Weight 30.3 lbs./ft. _____ 16 in. to 40 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 16 in. to 75 ft. depth | | |
| | | | | 8 Screen: Manufacturer W. A. Brown Type Double-slot Dia. 16" Slot/gauze 1/8 Length 60' Set between 40 ft. and 60 ft. _____ Fittings: 75' & 115' 3/8 Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____ | | |
| | | | | 9 Static water level: 9½ ft. below land surface Date 5-19-75 | | |
| | | | | 10 Pumping level below land surfaces: N/C _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m. | | |
| | | | | 11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____ | | |
| | | | | 12 Well head completion: <input type="checkbox"/> Pitless adapter 12 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 10 ft. | | |
| | | | | 14 Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" 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.m.p. 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. Clarke Well & Eq., Inc. 185 Business name License No. _____ Address Great Bend, KS Signed [Signature] Date 5-19-75 Authorized representative | | | | | | |
| | | | | | | |

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5