

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

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

1 Location of well:	County Stafford	Township name	Fraction NWS ^E	Section number 22	Town number 215	Range number 12W
Distance and direction from nearest town or city: 7 N. 2 1/2 E			3 Owner of well: ASPEN DRILLING CO.			
Street address of well location if in city: Hudson, Kansas			Address: Box 783 Great Bend, KS			
Locate with "X" in section below: <div style="text-align: center;"> </div>			Sketch map:			4 Well depth: 50 ft. Date of completion 9-28-75 Well diameter 5 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 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 checked="" type="checkbox"/> Oil Rig			
			7 Casing: Material PVC Height: above below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. Diam. 2 in. to 50 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 2 in. to 50 ft. depth			
			8 Screen: Manufacturer MPI Type PVC Dia. 2 Slot/gauze 1/8 Length 20' Set between 30 ft. and 50 ft. Fittings: 1/8-3/4" Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____			
			9 Static water level: 16 ft. below land surface Date 9-28-75			
			10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 50 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 <input checked="" type="checkbox"/> 12 Inches above grade			
			13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 0 ft. to 10 ft.			
			14 Nearest source of possible contamination: ft. 75 Direction S Type Oil test 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			
			16 Remarks: elevation _____ Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley			
			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. Kelly's Water Well Serv 186 Business name _____ License No. _____ Address R 2. Great Bend, KS Signed Kelly Duca Date 10-10-75 Authorized representative			

21 12W 22 NUSE