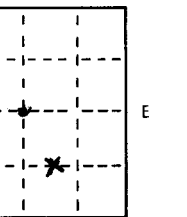


USE TYPEWRITER OR BALL
POINT PEN—PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

21 5; 2 W SE 23
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 SE 1/4	Section number 23	Town number 21	Range number 12
Distance and direction from nearest town or city: 10 MI. NE HUDSON, K.S.			3 Owner of well: Austin Widener Address: Hudson, Kansas			
Locate with "X" in section below: N  W E S 1 Mile			Sketch map:		4 Well depth: 147 ft. Date of completion 1-8-75 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 checked="" type="checkbox"/> Test well <input type="checkbox"/>	
					7 Casing: Material PVC Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. Diam. 100 Weight _____ lbs./ft. _____ 0 in. to _____ ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth	
2	Type and color of material	From	To	8 Screen: Manufacturer SHOP MADE Type PLASTIC Dia. 2 1/2" Slot/gauze 1/8 Length 18 Set between 400 ft. and 118 ft. _____ Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____		
	Sandy top soil	0	4	9 Static water level: 21 ft. below land surface Date 1-8-75		
	Gray + brown clay	4	45	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.		
	Sand	45	48	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
	Gray + brown clay + lime streaks	48	79	12 Well head completion: N/A <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
	Sand, gravel + clay streaks	79	85	13 Well grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From ____ ft. to ____ ft.		
	Brown clay + limestone	85	91	14 Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Sand, gravel + thin clay streaks at 107' + 120'	91	144	15 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		
	Gray clay	144	147			
(use a second sheet if needed)						
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. CLARKE WELL & EQ., INC. 185 Business name License No. _____ Address GREAT BEND K.S. Signed Dan H. Schuber Date 1-30-75 Authorized representative		