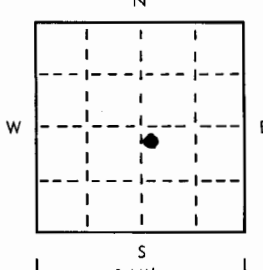


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

21 13 W 21 N 1/4 Sec 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 <b>Stafford</b>	Township name <b>NW 21</b>	Section number <b>21</b>	Town number <b>215</b>	Range number <b>13 W</b>
Distance and direction from nearest town or city: <b>10 S of Gibb on 81</b>			3 Owner of well: <b>Miller Admquist</b> Address: <b>Great Bend Ks</b>		
Locate with "X" in section below: N 		Sketch map:		4 Well depth: <b>68</b> ft. Date of completion: <b>4-30-75</b> Well diameter: <b>8</b> in	
2		Type and color of material		From	To
		<b>Clay</b>		<b>0</b>	<b>20</b>
		<b>Sand</b>		<b>20</b>	<b>45</b>
		<b>Gravel</b>		<b>45</b>	<b>68</b>
				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 checked="" 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"/> <b>Fish Pond</b>	
				7 Casing: Material: <b>Plastic</b> Height: <b>above</b> below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. Diam. <b>RMP</b> Weight <b>147</b> lbs./ft <b>120</b> <b>58</b> in. to <b>68</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
				8 Screen: Manufacturer: <b>Jess &amp; Lowell</b> Type: <b>RPM</b> Dia. <b>5</b> Slot gauze: <b>slot</b> Length <b>10</b> Set between <b>58</b> ft. and <b>68</b> ft. Fittings: <b>1/8-1/4</b> Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>—</b>	
				9 Static water level: <b>12</b> ft. below land surface Date <b>4-30-75</b>	
				10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <b>200</b> 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 <b>12</b> 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 <b>2</b> ft. to <b>10</b> ft.	
				14 Nearest source of possible contamination: <b>salt</b> ft. <b>560</b> Direction <b>east</b> Type <b>water</b> 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				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. <b>Myers water well 143</b> Business name _____ License No. _____ Address <b>Great Bend Ks</b> Signed <b>Arthur A. Myers</b> Date <b>4-30-75</b> Authorized representative	