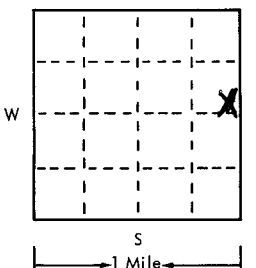


Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

County McPherson		Township name Superior		Fraction SE¹₄SE¹₄NE¹₄		Section number 18		Town number 21-S		Range number 4-W																															
1 Location of well: Distance and direction from nearest town or city: 1 Mi. West 1/2 Mi. South Street address of well location if in city: Of Inman						3 Owner of well: Don Schierling Address: R.R. 2 Inman, Kansas																																			
Locate with "X" in section below: 						Sketch map:																																			
2 Type and color of material <table border="1"><tr><td>Yellow Clay</td><td>0</td><td>45</td></tr><tr><td>Some Water</td><td>45</td><td>46</td></tr><tr><td>Red Shale</td><td>46</td><td>85</td></tr><tr><td>Water</td><td>85</td><td>87</td></tr><tr><td>Red Shale</td><td>87</td><td>90</td></tr><tr><td>Blue Shale</td><td>90</td><td>91</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table>						Yellow Clay	0	45	Some Water	45	46	Red Shale	46	85	Water	85	87	Red Shale	87	90	Blue Shale	90	91													4 Well depth: 91 ft. Date of completion 5-2-75 Well diameter 9 in. to 20ft. 7in. 20					
						Yellow Clay	0	45																																	
						Some Water	45	46																																	
						Red Shale	46	85																																	
						Water	85	87																																	
						Red Shale	87	90																																	
						Blue Shale	90	91																																	
						5 <input checked="" 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 type="checkbox"/> Reverse rotary																																			
						6 Use: <input checked="" 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 type="checkbox"/>																																			
						7 Casing: Material Plastic Height: above/below 18 in. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 160 lbs./ft. in. Diam. 5 in. to 91 ft. depth! Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 5 in. to 91 ft. depth!																																			
						8 Screen: certain-tee Manufacturer Plastic Dia. 5in. Type 1/8 Length 15 Slot/gauze 70 ft. and 85 ft. Set between Fittings: 1/ Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material																																			
						9 Static water level: 40 ft. below land surface Date 5-2-75																																			
						10 Pumping level below land surfaces: ____ 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 <input type="checkbox"/> 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 3 ft. to 15 ft.																																			
						14 Nearest source of possible contamination: 1/2 Mi. Direction North Type Cattle Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input 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. Backhus Drilling 180 Business name License No. Address Tampa, Kansas 67483 Signed Paul Backhus Date 5-2-75 Authorized representative																																			