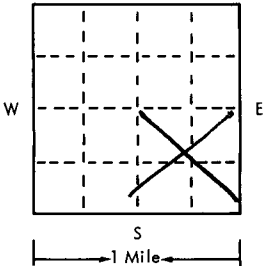


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Harvey	Township name	Fraction SE 1/4	Section number 9	Town number T22S	Range number R1W			
Distance and direction from nearest town or city: North 5.2 mi Hesston @			3 Owner of well: Buckley Supply Co.						
Street address of well location if in city: Hesston Corp.			Address: Hesston, Kansas Well No. 1-75						
Locate with "X" in section below: N  S 1 Mile			Sketch map:			4 Well depth: 52 ft. Date of completion 9/4/75 Well diameter 8 in.			
2 Type and color of material			From			To			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 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"/>
Top soil			0			2			7 Casing: Material Plst Height: above/below Class Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. 160 PVC Diam. 5 in. to 12 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth
Brown clay			2			9			8 Screen: Manufacturer _____ Type Plastic Dia. 5" Slot/gauze 1/16 Length 40' Set between 12 ft. and 52 ft. _____ Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/8 x 3/8
Brown silt			9			12			9 Static water level: 8 ft. below land surface Date 9-4-75
Med. to coarse sand & gravel mixed with			12			16			10 Pumping level below land surfaces: 28 ft. after 1 hrs. pumping 2 1/2 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 10 g.p.m.
clay									11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
Hard blue shale			16			51			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 checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 3 ft. to 10 ft.
									14 Nearest source of possible contamination: ft. 15 Direction North Type PVC Pressure Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Tight Sewer Line
									15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe 3 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
(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. Layne Western Co. 102 Business name _____ License No. _____ Address Wichita, Kansas Signed _____ Date 9/16/75 Authorized Representative
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley									

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

Form WWC-5