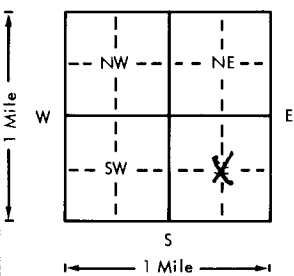


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 820-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:		County PAWNEE	Fraction 1/4 1/4 CSE 1/4	Section number 35	Township number T 22 S R 17 NW	Range number
2. Distance and direction from nearest town or city: 6 S. 3 W. Street address of well location if in city: Harred, KS			3. Owner of well: HARRY BOWMAN R.R. or street: Box 747 City, state, zip code: Sublette, KS			
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile			Sketch map: 			
5. Type and color of material			From	To	6. Bore hole dia. 30 in. Completion date 1-20-77 Well depth 76 ft.	
Top Soil - Clay			0	28	7. <input 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 checked="" type="checkbox"/> Reverse rotary	
Sand - Gravel			28	76	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
					9. Casing: Material Steel Height: 24 or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 24 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 16 in. to 36 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 3/16"	
					10. Screen: Manufacturer's name Doerr Type Steel Dia. 16" Slot/gauze 1/8" Length 20 Set between 56 ft. and 76 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/8-3/4"	
					11. Static water level: <input type="checkbox"/> mo./day/yr. 20 ft. below land surface Date 1-20-77	
					12. Pumping level below land surfaces: 50 ft. after 4 hrs. pumping 1000 g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 1100 g.p.m.	
					13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
					14. Well head completion: <input type="checkbox"/> Pitless adapter 24 inches above grade	
					15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.	
					16. Nearest source of possible contamination: None ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: <input type="checkbox"/> Not installed Manufacturer's name Goulds Model number 4125 HP 60 Volts <input type="checkbox"/> Length of drop pipe 70 ft. capacity 800 g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" 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)			
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		20. 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 Ser. 186 Business name R2 Great Bend, KS License No. <input type="checkbox"/> Address Kelly's Water Well Signed Kelly's Water Well Date 2-25-77 Authorized representative				

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5