

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

23 5 16 W T R EW sec 1/4 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

52 52 SE

1 Location of well:	County <b>PAWNEE</b>	Township name <b>Pleasant Valley</b>	Fraction <b>SE 1/4</b>	Section number <b>36</b>	Town number <b>23</b>	Range number <b>11a</b>	
Distance and direction from nearest town or city: <b>6 mi. NW MACKSVILLE, KS</b>			3 Owner of well: <b>Gordon Development</b> Address: <b>C/O DON PETERSON MACKSVILLE, KS</b>				
Locote with "X" in section below:		Sketch map:		4 Well depth: <b>100</b> ft. Date of completion <b>1-3-75</b> Well diameter <b>5</b> in.			
N W ——— E S 1 Mile		Sketch map: 		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			
2 Type and color of material				From		To	
				Top soil + sand		0	
Sandy gray + brown clay + limestone		8		41		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"/>	
Sand, gravel + clay streaks		41		42a		7 Casing: Material <b>PVC</b> Height, above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. Diam. <b>85</b> Weight _____ lbs./ft. _____ <b>0</b> in. to _____ ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth	
Brown clay + sandstone		42a		50		8 Screen: <b>SHOP MADE</b> Manufacturer _____ Type <b>PLASTIC</b> Dia. <b>2"</b> Slot/gauze <b>18</b> Length <b>10</b> Set between <b>85</b> ft. and <b>95</b> ft. _____ Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material _____	
Sand + gravel		50		6a2		9 Static water level: <b>19</b> ft. below land surface Date <b>1-3-75</b>	
Blue + brown clay		6a2		64		10 Pumping level below land surfaces: <b>N/C</b> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
Sand + gravel		64		76		11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
Cemented gravel + loose streaks		76		83		12 Well head completion: <b>N/A</b> <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade	
Sand + gravel		83		94		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 + blue clay + limestone		94		100		14 Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
(use a second sheet if needed)				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 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. <b>CURKE WELL + EQ, INC. 185</b> Business name _____ License No. _____ Address <b>GREAT BEND KS.</b> Signature <b>Don Peterson</b> Date <b>1-30-75</b> Authorized representative			