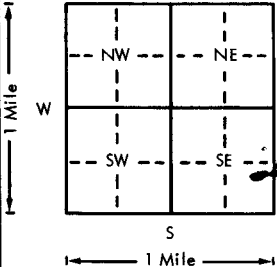


USE TYPEWRITER OR BALL  
POINT PEN—PRESS FIRMLY  
PRINT CLEARLY

WATER WELL RECORD  
KSA 82a-1201-1215

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

County <b>HARVEY</b>		Fraction <b>NE <del>SE</del> SE 1/4 <del>NE</del> 1/4 <del>SE</del> 1/4</b>	Section number <b>26</b>	Township number <b>T 23</b>	Range number <b>S R 2 1W</b>
2. Distance and direction from nearest town or city: Street address of well location if in city: <b>1 1/2 mile NO. OF HOLSTEAD KS</b>			3. Owner of well: <b>CECIL KELLER</b> R.R. or street: <b>R2</b> City, state, zip code: <b>HOLSTEAD KANS 67056</b>		
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. <b>8</b> in. Completion date <b>11-24-76</b> Well depth <b>65</b> ft.		
5. Type and color of material			7. <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		
			8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
			9. Casing: Material <b>PVC</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>20</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>3</b> lbs./ft. Dia. <b>4</b> in. to <b>65</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>346</b>		
			10. Screen: Manufacturer's name <b>CERTENTED</b> Type <b>PVC</b> Dia. <b>4"</b> Slot/gauze <b>18</b> Length <b>10 ft</b> Set between <b>55</b> ft. and <b>65</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <b>yes</b> Size range of material <b>1/4"</b>		
			11. Static water level: <input type="checkbox"/> mo./day/yr. <b>32</b> ft. below land surface Date <b>11-12-76</b>		
12. Pumping level below land surfaces: <b>41</b> ft. after <b>2</b> hrs. pumping <b>10</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>35</b> g.p.m.			13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
14. Well head completion: <b>no</b> <input type="checkbox"/> Pitless adapter <input type="checkbox"/> inches above grade			15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.		
16. Nearest source of possible contamination: <b>LATERAL</b> ft. <b>65</b> Direction <b>NE</b> Type <b>LINE</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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)					
18. Elevation:  Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks:  <b>Cased 65 ft</b>		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. <b>PETER J. TRILLER</b> <b>138A</b> Business name License No. Address <b>Box 150 Lindside, KS</b> Signed <b>William A. Plam</b> Date <b>12-8-76</b> Authorized representative	