

JETMORE SE

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

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

AB (center)

1 Location of well:	County HODGEMAN	Township name CENTER	Fraction 6 NW NE 4	Section number 3	Town number 23 S	Range number 23 W
Distance and direction from nearest town or city: 3 3/4 miles east of Jetmore				3 Owner of well: NORMAN WINGET		
Street address of well location if in city:				Address: JETMORE KAN 67854		
Locate with "X" in section below:		Sketch map:		4 Well depth: 77 ft. Date of completion: April 25		
				Well diameter _____ in.		
2 Type and color of material		From		5 <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug		
0 to 30 clay				<input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
30 to 42 sand good				6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry		
42 to 50 clay Blue				<input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial		
50 to 59 sand good				<input type="checkbox"/> Test well <input type="checkbox"/>		
59 to 64 clay				7 Casing: Material steel Height: above/below		
64 to 75 sand Blue				Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in.		
ROCK 75'				Diam. _____ Weight 3 lbs./ft.		
30				16 in. to 22 ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No		
45' sat thick				_____ in. to _____ ft. depth		
in Alluvium				8 Screen:		
				Manufacturer DOERR		
				Type travel board 16		
				Slot/gauze _____ Length 40		
				Set between 49 ft. and 77 ft.		
				Fittings:		
				Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/4"		
				9 Static water level:		
				30 ft. below land surface Date May 10		
				10 Pumping level below land surfaces:		
				70 ft. after 4 hrs. pumping 450 g.p.m.		
				_____ ft. after _____ hrs. pumping _____ g.p.m.		
				Estimated maximum yield 450 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 10 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 10 ft. to top .		
				14 Nearest source of possible contamination:		
				ft. _____ Direction _____ Type _____		
				Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				15 Pump:		
				<input type="checkbox"/> Not installed		
				Manufacturer's name Western Land Rollo		
				Model number _____ HP 20 Volts 480		
				Length of drop pipe 70 ft. capacity _____ 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		
16 Remarks: elevation				17 Water well contractor's certification:		
Topography:				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
<input type="checkbox"/> Hill				Knappler Bros 130		
<input type="checkbox"/> Slope				Business name _____ License No. _____		
<input type="checkbox"/> Upland				Address Jetmore Kansas		
<input checked="" type="checkbox"/> Valley TOPD				Signed Leo Knappler Date May 22		
				Authorized representative		

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

Form WWC-5