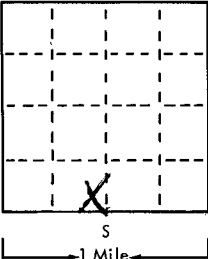


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 <b>Reno</b>	Township name <b>Reno S</b>	Fraction <b>SE SE SW</b>	Section number <b>2</b>	Town number <b>235</b>	Range number <b>6W</b>	
Distance and direction from nearest town or city: <b>Hutchinson, Ks</b>				3 Owner of well: <b>Joe A Davenport</b>			
Street address of well location if in city: <b>1200 W 17th</b>				Address: <b>1200 W 17 Hutchinson, Ks.</b>			
Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		4 Well depth: <b>29</b> ft. Date of completion <b>11-14-75</b> Well diameter <b>10</b> 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"/>	
						7 Casing: Material <b>RMP</b> Height: <b>5</b> ft. above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. Diam. <b>6</b> in. to <b>29</b> ft. depth! Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Weight <b>195</b> lbs./ft. <b>100</b>	
						8 Screen: Manufacturer <b>J &amp; L</b> Type <b>RMP</b> Dia. <b>6"</b> Slot/gauze <b>3/32</b> Length <b>10'</b> Set between <b>19</b> ft. and <b>29</b> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>8</b>	
(use a second sheet if needed)						9 Static water level: <b>12</b> ft. below land surface Date <b>11-14-75</b>	
						10 Pumping level below land surfaces: <b>14</b> ft. after <b>1</b> hrs. pumping <b>20</b> g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <b>25</b> 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 <input checked="" type="checkbox"/> <b>12"</b> inches above grade	
						13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> <b>concrete</b> Depth: From <b>0</b> ft. to <b>10</b> ft.	
						14 Nearest source of possible contamination: ft. <b>12</b> Direction <b>N</b> Type <b>sewer line</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
						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	
						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>Miller Water Well</b> <b>137</b> Business name _____ License No. _____ Address <b>Hutchinson, Ks.</b> Signed <b>Joe Miller</b> Date <b>12-5-75</b> Authorized representative	
						16 Remarks: elevation	
						Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley	