

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

WATER WELL RECORD  
KSA 82a-1201-1215

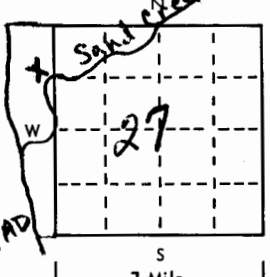
T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

SE NW NW

1 Location of well:	County: <b>Harvey</b>	Township name:	Fraction: <b>NW</b>	Section number: <b>28</b>	Town number: <b>T 245</b>	Range number: <b>1 W</b>
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Distance and direction from nearest town or city: <b>1 3/4 mi. n Sedg.</b>	3 Owner of well: <b>Joe Harper</b>
Street address of well location if in city:	Address: <b>Sedgwick, Kansas</b>

Locate with "X" in section below: 	Sketch map: <b>open field</b> <b>(Did not know fraction as is irregular section)</b>	4 Well depth: <b>93</b> ft. Date of completion <b>Dec.</b> Well diameter <b>30</b> in.
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2	Type and color of material	From	To	6 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"/> Commercial <input type="checkbox"/> Test well
	<b>Topsoil</b>	<b>0</b>	<b>1'</b>	7 Casing: Material <b>C-A</b> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. Digm. <b>16</b> in. to <b>93</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No in. to ft. depth
	<b>Clay - Red - gray</b>	<b>1</b>	<b>30'</b>	8 Screen: Manufacturer <b>Johnson</b> Type <b>Cem-Asb.</b> Dia. <b>1 1/4"</b> Slot/gauze <b>1/4"</b> Length <b>40'</b> Set between <b>23</b> ft. and <b>93</b> ft.
	<b>Fine Sand</b>	<b>30'</b>	<b>40'</b>	Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>7/8</b>
	<b>Med. Gravel</b>	<b>40</b>	<b>90</b>	9 Static water level: ft. below land surface Date
				10 Pumping level below land surfaces: ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield <b>600</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 type="checkbox"/> 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 <b>0</b> ft. to <b>10</b> ft.
				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 <b>Peerless</b> Model number <b>615447</b> HP Volts Length of drop pipe <b>70</b> ft. capacity <b>700</b> g.m.p. 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  Topography: <input type="checkbox"/> Hill <input checked="" 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>Weninger Drilling 238</b> Business name <b>Maize Kansas</b> License No. Address <b>Maize Kansas</b> Signed <b>Mrs. Don Weninger</b> Date <b>1/22/76</b> Authorized representative
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