

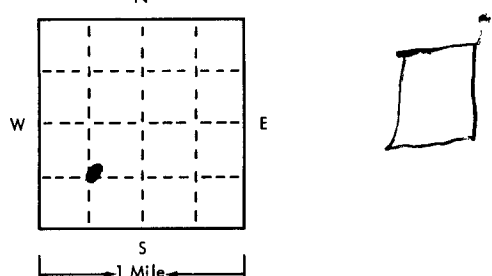
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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

#15

<input checked="" type="checkbox"/> Location of well:	County: Edwards	Township name: Wayne E	Fraction: SE 1/4	Section number: 36	Town number: 24	Range number: 17
<input checked="" type="checkbox"/> Distance and direction from nearest town or city: Street address of well location if in city: SE 3/4 S. 1/4 E. Jewell				3 Owner of well: Don McAllister Address: Box 181 Lewis, Kansas 67552		
<input checked="" type="checkbox"/> Locate with "X" in section below: Sketch map: 				4 Well depth: 81 ft. Date of completion: 3/14/75 Well diameter: 16 in.		
2 Type and color of material				5 <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary		
soil				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		
clay				7 Casing: Material: Stemite Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 8 in. Diam. 16 in. Weight 30 lbs./ft. 14 in. to 55 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
sand(good)				8 Screen: Manufacturer: Johnson Type: slotted Dia. 16 Slot/gauze: 3/16 Length: 26 Set between: 53 ft. and 81 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material: 1/4 1/4		
clay				9 Static water level: 19 ft. below land surface Date: 12/19/74		
Test Pumping				10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield: 1800 g.p.m.		
1400 RPM 800 GPM 50 ft. Lift				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date: _____		
1500 RPM 900 GPM 54 ft. Lift				12 Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade		
1600 RPM 1000 GPM 55 ft. Lift				13 Well grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 0 ft. to 10 ft.		
1700 RPM 1100 GPM 60 ft. Lift				14 Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
1800 RPM air 1200 GPM 62 ft. Lift				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name: Western Land Roller Model number: 31912R5 69 Volts _____ Length of drop pipe: 60 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: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Darling Drilling Co. 189 Business name License No. _____ Address: 2211 West 4th Hutchinson, Ks Signed: Donald Darling Date: 3-29-75 Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

24 17W 36 1CSF

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

Form WWC-5