

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

2517W34CWNW
T R EW sec 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

Gatterman
Galeroman #1

1 Location of well:		County Edwards	Township name	Fraction C-NW-NW	Section number 38 34	Town number 255	Range number 17W
Distance and direction from nearest town or city: 1 north 1/2 West 3/4 north felsburg				3 Owner of well: Search Drilling Co Address: Wichita Ko. Galeroman #1			
Locate with "X" in section below:		Sketch map:		4 Well depth: 65 ft. Date of completion: 5-14-75 Well diameter: 2 1/2 in.			
				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 type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input checked="" type="checkbox"/> Oil Field Prod Supply			
				7 Casing: Material plastic Weight: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 4 in. Diam. 4 in. to 65 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Weight 125 lbs./ft. 100 RMP			
2		Type and color of material		From	To	8 Screen:	
		clay		0	15	Manufacturer Jess & Lowell	
		sand		15	40	Type RPM Dia. 4	
		shovel		40	65	Slot/gauze Slot Length 20	
						Set between 45 ft. and 65 ft.	
						Fittings:	
						Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 6-4	
						9 Static water level: 10 ft. below land surface Date 5-14-75	
						10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ 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 12 <input type="checkbox"/> Inches above grade	
						13 Well grouted? <input checked="" 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.	
						14 Nearest source of possible contamination: salt ft. 100 Direction east Type water Well disinfected upon completion? <input 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. myers water well co 1413 Business name _____ License No. _____ Address First Bend Ko Signed Arthur Myers Date 5-14-75 Authorized representative	

95 17W 34 CWNW