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

NE NW NW

1 Location of well:	County	Township name	Fraction	Section number	Town number	Range number
	Selgwick	Greely	~~R 25 S~~	25	25S	R-3-W

Distance and direction from nearest town or city: 3½ East Mt Hope
Street address of well location if in city:

3 Owner of well: willie Winter
Address: Mt Hope

Locate with "X" in section below: N / W / E / S — X in NE of NW quarter
1 Mile

Sketch map:

4 Well depth: 48 ft. Date of completion 4-21-75
Well diameter 5" in.

5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug
☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary

6 Use: ☒ Domestic ☐ Public supply ☐ Industry
☐ Irrigation ☐ Air conditioning ☐ Commercial
☐ Test well ☐

7 Casing: Material RMP ~~Styrene~~ X Height: (above)/below
Threaded ☐ Welded ☐ Surface 24 in.
Diam. Weight ___ lbs./ft. ___
5" in. to 48 ft. depth Drive shoe? ☐ Yes ☒ No
___ in. to ___ ft. depth

8 Screen:
Manufacturer Joe Lowell J & L
Type RMP ~~Styrene~~ Dia. 5"
X Slot/gauze 1/16" Length 10'
Set between 48 ft. and 38 ft.
Fittings:
Gravel pack ☒ Yes ☐ No Size range of material 3/8

9 Static water level:
8 ft. below land surface Date 4-21-75

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:
☐ Yes ☒ No Date ___

12 Well head completion:
☐ Pitless adapter ☒ 18 Inches above grade

13 Well grouted? ☐ Yes ☒ No
☐ Neat cement ☐ Bentonite ☐
Depth: From ___ ft. to ___ ft.

14 Nearest source of possible contamination:
ft. 1 mile Direction North Type River
Well disinfected upon completion? ☐ Yes ☒ No

15 Pump: ☒ Not installed
Manufacturer's name
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Reciprocating
☐ Certrifugal ☐ Other

2 Type and color of material	From	To
Top soil	0	10
Sand	10	48
Customer was to cement		
& disinfect well as I		
told him it was to be done		

(use a second sheet if needed)

16 Remarks: elevation

Topography:
☐ Hill
☒ Slope
☐ Upland
☐ 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.
Wenzel 238
Business name License No.
Address D M Wenzel
Signed Main Date 5-20-75
Authorized representative

25 3W 25 NE NW NW

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

Form WWC-5

677-H