

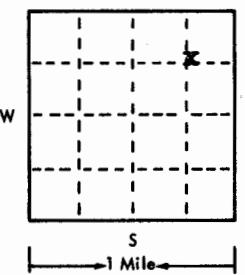
USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

710

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

WATER WELL RECORD
KSA 82a-1201-1215

1 Location of well:	County Gray	Township name Logan	Fraction Mid. of NE 1/4	Section number 26	Town number TS 25	Range number RW 30
Distance and direction from nearest town or city: 1 mile south, 1 west of Charleston, Ks.			3 Owner of well: Don Renick Ingalls, Ks.			
Locate with "X" in section below: 			Sketch map: _____			
<p>4 Well depth: <u>170</u> ft. Date of completion <u>1-30-75</u> Well diameter <u>26</u> in.</p> <p>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</p> <p>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</p> <p>7 Casing: Material <u>St.</u> Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. Diam. <u>3 1/2</u> in. Weight <u>34.2</u> lbs./ft. <u>1</u> in. to ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No in. to ft. depth</p> <p>8 Screen: Manufacturer <u>Johnson Division</u> Type <u>Galv.</u> Dia. <u>16"</u> Slot/gauze <u>100</u> Length <u>20'</u> Set between <u>130</u> ft. and <u>140</u> ft. <u>155-165</u> Perfings <u>25-130, 140-155, 165-170</u> Gravel pack <input type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1/2" down</u></p> <p>9 Static water level: <u>11</u> ft. below land surface Date <u>1-30-75</u></p> <p>10 Pumping level below land surfaces: <u>20</u> ft. after <u>3</u> hrs. pumping <u>1170</u> g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield <u>1200</u> g.p.m.</p> <p>11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____</p> <p>12 Well head completion: <input type="checkbox"/> Pitless adapter <u>1 1/2</u> inches above grade</p> <p>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"/> Clay Puddled Depth: From <u>0</u> ft. to <u>10</u> ft.</p> <p>14 Nearest source of possible contamination: <u>N/A</u> ft. Direction Type Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>FMC-Peerless</u> Model number <u>3880</u> HP <u>1</u> Volts <u>220</u> Length of drop pipe <u>120</u> ft. capacity <u>800</u> 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</p> <p>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. <u>Minter-Wilson Drilg. Co. 208</u> Business name _____ License No. _____ Address <u>Box 493 Garden City, Ks.</u> Signature <u>John Minter</u> Date <u>3-14-75</u> Authorized representative</p>						
(use a second sheet if needed)						
<p>16 Remarks: elevation Electric motor. (We did not sell, so don't know volts or horsepower)</p> <p>Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley</p> <p>Good well. No possible contamination.</p>						

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

Form WWC-5