39

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

1 Location of well:	County	Township name	Fraction	Section number	Town number	Range number
	~~Kearny~~ Kearney		CN½NWNW ~~Center~~	2	T 25 S	R 35 W

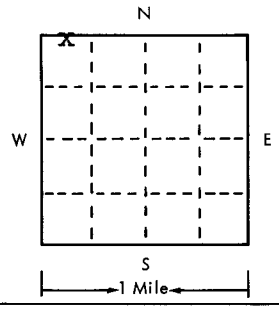
Distance and direction from nearest town or city:

Street address of well location if in city:

3 Owner of well: Dean ~~Jiggot~~ Giggot

Address: Garden City, Kansas

Locate with "X" in section below:



Sketch map:

4 Well depth: 300 ft. Date of completion 1-25-75
Well diameter ____ 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 ____ Height: above/below
Threaded ☐ Welded ☐ Surface ____ in.
Diam. ____ Weight ____ lbs./ft.
____ in. to ____ ft. depth Drive shoe? ☐ Yes ☐ No
____ in. to ____ ft. depth

2

Type and color of material	From	To
Surface Clay & sand	0	100
Med. to coarse loose clean sand w/clay	100	120
Soft multi color clay w/san strips	120	140
Med.. to coarse loose clean sand w/clay	140	160
Gray & brown clay w/rockstrips	160	180
Coarse loose clean sand w/clay	180	200
Coarse loose clean sand w/clay	200	220
Med. to coarse loose clean sand w/clay	220	240
Med. to coarse loose clean sand w/clay	240	260
Med. tight dirty sand w/clay	260	280
Clay w/med. to coarse sand strip	280	300
(use a second sheet if needed)		

8 Screen:
Manufacturer ____
Type ____ Dia. ____
Slot/gauze ____ Length ____
Set between ____ ft. and ____ ft.
Fittings:
Gravel pack ☐ Yes ☐ No Size range of material ____

9 Static water level: approx. 100
____ 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 ____ g.p.m.

11 Water sample submitted:
☐ Yes ☒ No Date ____

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

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

14 Nearest source of possible contamination: in pasture
ft. ____ Direction ____ Type ____
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
☐ Centrifugal ☐ Other

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.
Duke's Drilling Co. 281
Business name License No.
Address Lawrence, Kansas
Signed H. C. Burkett Jr. Date 2-2-75
Authorized representative by [illegible]

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

Form WWC-5

677-H