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

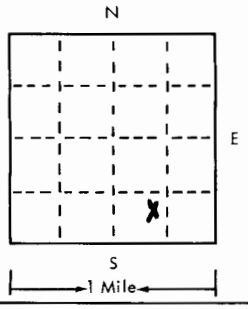
Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

| 1 Location of well: | County | Township name | Fraction | Section number | Town number | Range number |
|---|---|---|---|---|---|---|
| | Sedg. | Union | NE SW SE | 21 | 26S | 2W |

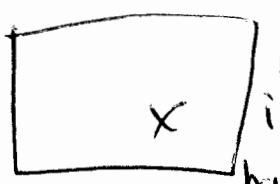
Distance and direction from nearest town or city: 1 50 1/4 W Colwich Ks
Street address of well location if in city:

3 Owner of well: John Hilger Jr
Address: 126 Cardinal Dr Colwich KS 67030

Locate with "X" in section below:




Sketch map:




4 Well depth: 50 ft. Date of completion 3/23/77
Well diameter 5 in. 11"

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 PVC Height: above/below
Threaded ☐ Welded ☒ Surface 1 ft. in.
Diam. 5 in. to 50 ft. depth Weight 237 lbs./ft 160
Drive shoe? ☐ Yes ☒ No
___ in. to ___ ft. depth

| 2 Type and color of material | From | To |
|---|---|---|
| Top Soil | 0 | 6 |
| clay | 6 | 18 |
| fine sand | 18 | 26 |
| clay | 26 | 27 |
| med to course gravel | 27 | 50 |

(use a second sheet if needed)

8 Screen:
Manufacturer Pumpco. MPI
Type PVC Dia. 5 yz
Slot/gauze 4/16 Length 5 ft
Set between 45 ft. and 50 ft.
Fittings:
Gravel pack ☒ Yes ☐ No Size range of material 3/8

9 Static water level:
18 ft. below land surface Date 3/23/77

10 Pumping level below land surfaces:
18 ft. after 1/2 hrs. pumping 20 g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 50 g.p.m.

11 Water sample submitted:
☐ Yes ☒ No Date _____

12 Well head completion:
☐ Pitless adapter ☒ 1 inches above grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐ _____
Depth: From 7 ft. to 17 ft.

14 Nearest source of possible contamination:
ft 300 Direction East Type Creek
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.
Business name Clarence Dulling License No. 318
Address Colwich
Signature Clarence Dulling Date 3/23/77
Authorized representative

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

Form WWC-5

677-H