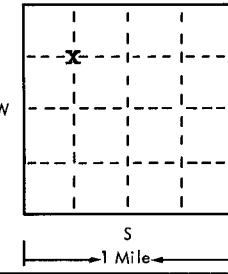


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Gray	Township name Ingalls	Fraction Pivot NW $\frac{1}{4}$	Section number 5	Town number T 26 S	Range number R 30 W
Distance and direction from nearest town or city: <u>3 1/2</u> south, <u>3 1/2</u> west <u>3/4</u> north, <u>1/4</u> west of <u>Charleston, Ks.</u>			3 Owner of well: <u>Don Benick</u> Address: <u>Ingalls, Ks.</u>			
Street address of well location if in city:						
Locate with "X" in section below: 			Sketch map:			
<p>4 Well depth: <u>265</u> ft. Date of completion <u>1-20-75</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 <input type="checkbox"/></p> <p>7 Casing: Material <u>Steel</u> Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. Diam. <u>16</u> in. to <u>266</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>16</u> in. to <u>266</u> ft. depth</p> <p>8 Screen: Manufacturer <u>Johnson Division</u> Type <u>Galv.</u> Dia. <u>16"</u> Slot/groove _____ Length <u>20'</u> Set between <u>150</u> ft. and <u>160</u> ft. <u>220-230</u> Boregs: <u>100-150, 160-220, 230-265</u> Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>12</u> down</p> <p>9 Static water level: <u>22</u> ft. below land surface Date <u>2-8-75</u></p> <p>10 Pumping level below land surfaces: <u>82</u> ft. after <u>2</u> hrs. pumping <u>882</u> g.p.m. <u>88</u> ft. after <u>4</u> hrs. pumping <u>1209</u> 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>12</u> inches above grade</p> <p>13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> 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>Peerless-FMC</u> Model number <u>4465</u> HP _____ Volts _____ Length of drop pipe <u>160</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>16 Remarks: elevation elevation Surrounded by fields. Good Well. Electric motor.</p> <p>Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley</p> <p>(use a second sheet if needed)</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 Drilling Co., 200</u> Business name _____ License No. _____ Address <u>Box 493 Garden City, Ks.</u> Signature <u>Minter-Wilson Drilling Co.</u> Date <u>6-20-75</u> Authorized representative _____</p>						

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

Form WWC-5

INTER-WILSON DRILLING CO. INCORPORATED

Irrigation
and Domestic
Water Systems
Complete Installation
and Repairing

Phone 276-3269 • P.O. Box 493 • GARDEN CITY, KANSAS 67846

Don Renick
1-10-75

Location: NW 5-26-30

South of Charleston
to Plymell rd 3 $\frac{1}{2}$ West 3/4 south, $\frac{1}{2}$ north of sprinkler
on south

Test #2

0	16	Fine to med sand
16	26	Brown clay
26	129	Fine to med sand & gravel streaks of coarse Gravel (loose)
129	140	Brown clay
140	162	Fine to med sand & gravel 10% clay (loose)
162	173	Brown clay
173	212	Brown sandy clay & brown clay
212	230	Fine to med sand& gravel (loose)
230	243	Fine to med sand & gravel 20% clay
243	260	Fine to med sand & gravel 10% clay (loose)
260	279	Brown sandy clay & brown clay
279	286	Brown & yellow clay (tight)
286	290	Shale (hard)

TD 265