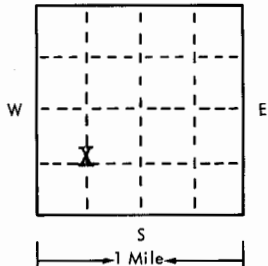


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

1 Location of well:	County Gray	Township name Ingalls	Fraction 300' N of Pivot SW 1/4	Section number 25	Town number T 26 S	Range number R 30 W		
Distance and direction from nearest town or city: Charleston, KS, 1/4 east Street address of well location if in city:			3 Owner of well: Lloyd Schmidt Address: Ingalls, KS 67853					
Locate with "X" in section below: N  W E S 1 Mile			Sketch map:			4 Well depth: 261 ft. Date of completion 3-8-75 Well diameter 26 in.		
2 Type and color of material			From			To		
			8 Screen: Manufacturer Johnson Division Type Galv. Dia. 16" Slot 1/8" Length 20' Set between 180 ft. and 200 ft. Perforations: 125-180, 200-261 Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/2" down					
			9 Static water level: 76 ft. below land surface Date 3-10-75					
			10 Pumping level below land surfaces: 103 ft. after 2 hrs. pumping 726 g.p.m. 121 ft. after 4 hrs. pumping 1227 g.p.m. Estimated maximum yield 1200 g.p.m.					
			11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____					
			12 Well head completion: <input type="checkbox"/> Pitless adapter 12 inches above grade					
			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 0 ft. to 10 ft.					
			14 Nearest source of possible contamination: N/A ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
			15 Pump: <input type="checkbox"/> Not installed Manufacturer's name Peerless-FMC Model number 4176 HP 100 Volts _____ Length of drop pipe 160 ft. capacity 1200 g.p.m. 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					
16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> 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. Minter-Wilson Dril. Co., Inc. 208 Business name License No. _____ Address Box 193, Garden City, KS 67846 Signed [Signature] Date 7/28/75 Authorized representative					

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

Form WWC-5

Photo 272728

P.O. Box 493 • GARDEN CITY, KANSAS 67846

Lloyd Schmidt

1-9-75

Location: 300ft. north of pivot, SW 25-26-30

Test: #3

0	2	Top soil
2	17	Clay & sand mixed
17	39	Fine to med. sand, streak of clay
39	52	Brown sandy clay
52	91	Fine to med. sand & gravel, streak of coarse gravel (loose)
91	95	Brown clay
95	108	Fine to med. sand & gravel, 10% clay (loose)
108	125	Brown sandy clay & brown clay
125	142	Fine to med. sand & gravel (loose)
142	164	Brown clay
164	170	Fine to med. sand & gravel, 20% clay (loose)
170	183	Fine to med. sand & fine gravel, 15% clay (loose)
183	214	Fine to med. sand & gravel (loose)
214	230	Brown clay
230	245	Fine to med. sand & gravel, 30% clay (loose)

The
Professionals

WINTER-WILSON DRILLING CO.
INCORPORATED

Irrigation
and Domestic
Water Systems
Complete Installation
and Repairing

Phone 276-3269

P.O. Box 493

GARDEN CITY, KANSAS 67846

245	257	Fine to med. sand & gravel (loose)
257	264	Brown clay
264	271	Brown & yellow clay (tight)
271	275	Shale (Hard)

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