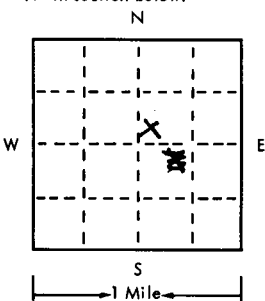
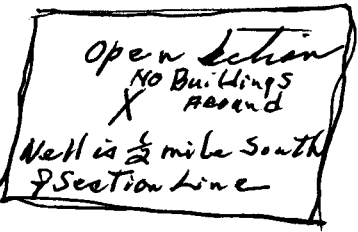


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 <u>Hamilton</u>	Township name <u>Bear Creek</u>	Fraction <u>NE 1/4</u>	Section number <u>23</u>	Town number <u>26</u>	Range number <u>43 W</u>				
Distance and direction from nearest town or city: <u>2 Coolidge, Kansas</u> Street address of well location if in city:				3 Owner of well: <u>J. Homer Davis</u> Address: <u>Syracuse, Kansas 67878</u>							
Locate with "X" in section below:		Sketch map:		4 Well depth: <u>427</u> ft. Date of completion: <u>3-6-76</u> Well diameter <u>2 1/2</u> in.							
				5 <input type="checkbox"/> Cable tool <input checked="" 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 type="checkbox"/> Reverse rotary							
2		Type and color of material		From		To		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			
								7 Casing: Material <u>Steel</u> Height: <u>above</u> below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. Diam. <u>1 1/2</u> in. to <u>4 1/2</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
								8 Screen: Manufacturer <u>U.P.</u> Type <u>Johnson</u> Dia. <u>1 1/2</u> " Slot gauge <u>1/8</u> " Length <u>180'</u> Set between <u>247</u> ft. and <u>427</u> ft. Fittings: <u>NONE</u> Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>4-8mm</u>			
								9 Static water level: <u>160</u> ft. below land surface Date <u>4-25-76</u>			
								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.			
(use a second sheet if needed)								11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____			
								12 Well head completion: <u>20</u> <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> 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 <u>2</u> ft. to <u>12</u> ft.			
								14 Nearest source of possible contamination: <u>NONE</u> ft. ____ Direction ____ Type ____ Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
								15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.m.p. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other			
16 Remarks: elevation <u>3330</u> Topography: <u>Land Slopes to N-NE</u> <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. <u>Dreiling, Inc.</u> <u>210</u> Business name License No. Address <u>Box 457, Holly, Colo 81047</u> Signed <u>D. J. Dreiling</u> Date <u>4-18-76</u> Authorized representative			