

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 FORD	Township name S 1/2 FAIRVIEW	Fraction NW 1/4	Section number 22	Town number 27	Range number 26
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Distance and direction from nearest town or city: **7 MI - S.W. DODGE CITY**

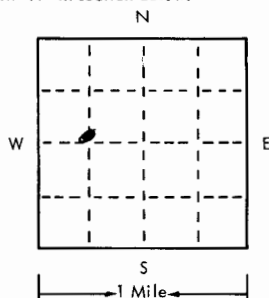
Street address of well location if in city: **ON HWY 56 - 1/2 S - 3/8 E.**

3 Owner of well: **CLARENCE HERRMAN**

Address: **ENSIGN KAN.**

Locate with "X" in section below:

Sketch map:



2	Type and color of material	From	To
	SURFACE	0	3
	CLAY	3	66
	SAND LAYERS & CLAY	66	91
	FINE SAND	91	118
	CLAY	118	121
	MED. FINE SAND	121	139
	CLAY	139	141
	SAND & MED. GRAVEL	141	178
	HARD STRINGER	178	179
	SAND & GRAVEL	179	190
	CALICHE & CLAY	190	210
	FINE SAND & CLAY LAYERS	210	225
	HARD LAYERS & CLAY	225	234
	HEAVY CLAY	234	238
	BLACK SHALE	238	
	(use a second sheet if needed)		

4 Well depth: **225** ft. Date of completion _____
Well diameter **2 1/2** 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 **STEEL** Height: above/below
Threaded ☐ Welded ☒ Surface _____ in.
Diam. _____ Weight _____ lbs./ft. _____
1 1/2 in. to **225** ft. depth Drive shoe? ☐ Yes ☐ No
_____ in. to _____ ft. depth

8 Screen:
Manufacturer **WA BROWN**
Type **BRIDGE** Dia. **1 1/2**
Slot/gauze **1/8** Length _____
Set between _____ ft. and _____ ft. _____
Fittings:
Gravel pack ☒ Yes ☐ No Size range of material **1/2** DOWN

9 Static water level:
_____ 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 ☒ CEMENT
Depth: From _____ ft. to _____ ft.

14 Nearest source of possible contamination: **NO** NE
ft. _____ Direction _____ Type _____
Well disinfected upon completion? ☐ Yes ☐ No

15 Pump:
☐ Not installed
Manufacturer's name **WESTERN LAND ROLLER**
Model number _____ HP **100** Volts _____
Length of drop pipe **210** ft. capacity **200** 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.
JO JOHNSON DRILLING CO
Business name _____ License No. _____
Address **DODGE CITY KAN 67801**
Signed **JO JOHNSON** Date **5-31** 75
Authorized representative