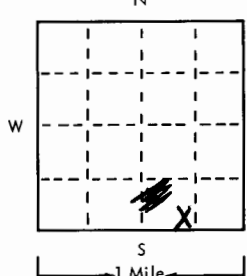


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

2727W 17SESWSE
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 East Hess	Fraction SE$\frac{1}{4}$SWSE	Section number #17	Town number T #27 S	Range number R #27 W
Distance and direction from nearest town or city: 3 east of Cimarron. Street address of well location if in city:			3 Owner of well: Mrs. Guy Salem Address: Cimarron, Kansas 67835			
Locate with "X" in section below: 			Sketch map: SE$\frac{1}{4}$ of the SW$\frac{1}{4}$ of the SE$\frac{1}{4}$ of Section #17 T#27 E R #27S			
2			Type and color of material		From	To
			Top soil & clay		0	15
			Clay		15	30
			Clay & fine sand		30	45
			" " "		45	60
			Fine sand		60	75
			" "		75	90
			" "		90	105
			Fine to medium sand		105	120
			Medium sand		120	135
			Medium to coarse sand		135	150
			Coarse sand		150	165
			" "		165	180
			Coarse sand & clay		180	195
			Clay & blue shale		195	210
			(use a second sheet if needed)			
16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" 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. JOE'S WELL SERVICE 179 Business name License No. Address Box 174 Cimarron, Ks. Signed Larry Crick Date 8-30-75 Authorized representative			
			14 Nearest source of possible contamination: in middle of field ft. of field _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
			15 Pump: Manufacturer's name Flint & Walling Model number 10BA15 HP 1 Volts 230 Length of drop pipe 147 ft. capacity 19 g.m.p. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other			
			12 Well head completion: <input checked="" 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 7 ft. to 20 ft.			
			9 Static water level: 106 ft. below land surface Date 8-13-75			
			8 Screen: Manufacturer Sunflower Type RMP Dia. 5" Slot/gauze 1/8" Length 20 ft. Set between 175 ft. and 195 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/4"			
			7 Casing: Material RMP Height: above/_____ 12 in. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. Digm. _____ Weight _____ lbs./ft. _____ 5 in. to 200 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth			
			6 Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> _____			
			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			
			4 Well depth: 200 ft. Date of completion 8-13-75 Well diameter 8 in.			

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

Form WWC-5