

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

T R EW sec 1/4 1/4 1/4 No.

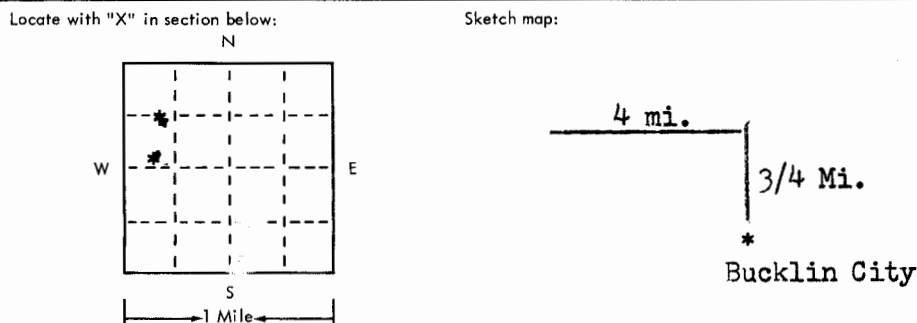
WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County Ford	Township name Valley	Fraction SW NW	Section number 16	Town number T28S	Range number R21N
---------------------	-----------------------	--------------------------------	--------------------------	-----------------------------	----------------------------	-----------------------------

Distance and direction from nearest town or city: **3/4 N. 4 Mi. W.**
Street address of well location if in city: **Bucklin, Kansas**

3 Owner of well: **Leo Konda**
Address: **Spearville, Kansas**



4 Well depth: **70** ft. Date of completion **4-10-75**
Well diameter **28** 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 **iron** Height: above ~~level~~
Threaded Welded Surface **12** in.
Diam. Weight **219** lbs./ft.
16 in. to **10** ft. depth! Drive shoe? Yes No
___ in. to ___ ft. depth!

2	Type and color of material	From	To
	Top soil	0	35
	Good gravel	35	70
	Shale	70	
	Two wells on quarter 20x40 acres		
	(use a second sheet if needed)		

8 Screen:
Manufacturer **Doerr**
Type **steel slot** Dia. **16"**
Slot/gauze **3/16** Length **50'**
Set between **bottom** and **20** ft. ___
Fittings:
Gravel pack Yes No Size range of material **1/2"**

9 Static water level:
35 ft. below land surface Date **4-10-75**

10 Pumping level below land surfaces:
60 ft. after **1** hrs. pumping **600** 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: **12"**
 Pitless adapter Inches above grade

13 Well grouted? Yes No
 Neat cement Bentonite **clay**
Depth: From **0** ft. to **10** ft.

14 Nearest source of possible contamination: **none**
ft. ___ Direction ___ Type ___
Well disinfected upon completion? Yes No

15 Pump: Not installed
Manufacturer's name **Fairbanks Morse**
Model number **7000** HP **40** Volts **440**
Length of drop pipe **60** ft. capacity **400** g.m.p.
Type:
 Submersible Turbine
 Jet Reciprocating
 Centrifugal Other

16 Remarks: elevation
Topography: **Flat**
 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.
Brau Drilling Co. **217**
Business name **Bucklin, Kansas** License No. ___
Address **Bucklin, Kansas**
Signed **Robert Brau** Date **4-20-75**
Authorized representative