

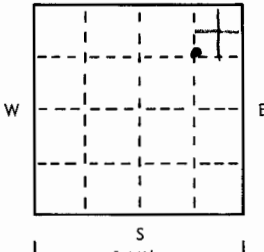
USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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

AAC

1 Location of well:		County FORD	Township name EAST 1/2 CONCORD	Range SW NE NE	Section number 10	Town number 28	Range number 25
Distance and direction from nearest town or city: 7 1/4 m. SOUTH OF BEESON ROAD ON 1st. 1/4 W TO WELL DODGE CITY KAN				3 Owner of well: MELVIN BELL Address: RFO FOWLER KAN			
Locate with "X" in section below: N  W E S 1 Mile		Sketch map:		4 Well depth: 181 ft. Date of completion _____ Well diameter 2 1/2 in.			
2 Type and color of material				5 <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary			
				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 <input type="checkbox"/> _____			
				7 Casing: Material STEEL Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface _____ in. Diam. _____ Weight _____ lbs./ft. _____ 1 1/2 in. to 181 ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth			
				8 Screen: Manufacturer WABROW Type BRIDGE Dia. 1 1/2 in. Slot/gauze 1/16 Length _____ Set between 12 ft. and 181 ft. _____ Fittings: _____ Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/2 DOWN			
				9 Static water level: 120 ft. below land surface Date _____			
10 Pumping level below land surfaces: 170 ft. after 4 hrs. pumping 1200 g.p.m. _____ ft. after _____ hrs. pumping _____ 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 <input checked="" type="checkbox"/> Inches above grade				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> CEMENT Depth: From 0 ft. to 10 ft.			
14 Nearest source of possible contamination: NONE 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 WLA Model number _____ HP _____ Volts _____ Length of drop pipe 180 ft. capacity _____ 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 type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley 179 2433				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 183 Business name License No. _____ Address DODGE CITY KAN Signed JO JOHNSON Date 10-24-75 Authorized representative			