

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

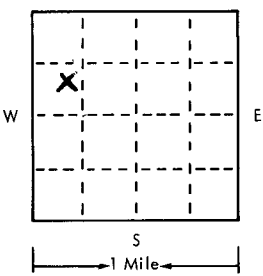
Page one.

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

Location

1 Location of well:	County GRAY	Township name Capeland	Fraction NESW NW	Section number 13	Town number 28	Range number 30 W
Distance and direction from nearest town or city: Montezuma 1/2 N 5 1/2 W 1/2 N 1/4 E 1/4 N Street address of well location if in city:				3 Owner of well: Verle Seice Address: Montezuma, Ks.		
Locate with "X" in section below: 				4 Well depth: 372 ft. Date of completion _____ Well diameter 28 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		
From To				7 Casing: Material STEEL Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface _____ in. Diam. _____ Weight _____ lbs./ft. _____ 16 in. to _____ ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to 153 ft. depth 153		
				8 Screen: Manufacturer W.A. Brown Type Bridge Dia. 16 Slot/gauze 1/8 Length _____ Set between 153 ft. and 372 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/2 down		
surface				0	2	9 Static water level: 136 ft _____ ft. below land surface Date _____
clay				2	87	10 Pumping level below land surfaces: 170 ft. after _____ hrs. pumping 1200 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.
clay & caliche				87	103	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
sand & gravel				103	120	12 Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade
med. sand small gravel				120	137	13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.
caliche & clay				137	150	14 Nearest source of possible contamination: NONE ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No
hard stringers & clay				150	156	15 Pump: <input type="checkbox"/> Not installed Manufacturer's name Western Hand Roller Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity 865 g.m.p. 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
med. sand & gravel				156	169	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. Johnson Drilling 183 Business name _____ License No. _____ Address Box 746 Signed Janice Alder Date 11/2/76 Authorized representative
cemented sand				169	171	
med. sand & gravel				171	178	
clay				178	185	
med. sand				185	191	
clay				191	204	
med. fine sand				204	211	
clay				211	226	
(use a second sheet if needed)						
16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

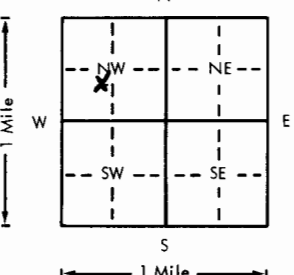
Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5

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WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County <u>Gray</u>	Fraction <u>NE 1/4 SW 1/4 NW 1/4</u>	Section number <u>13</u>	Township number <u>T 28 S</u>	Range number <u>R 30 E</u>	
2. Distance and direction from nearest town or city: <u>SN 5.5W .5N .25E .25N Montezuma</u>			3. Owner of well: <u>Verle Soice</u> R.R. or street: City, state, zip code: <u>Montezuma, KS</u>			
4. Locate with "X" in section below: <div style="text-align: center;">  </div>			Sketch map:			
5. Type and color of material			From	To		
			fine sand & layers clay		226	237
			caliche & clay		237	252
			fine sand layers & clay layers		252	271
			sand layers & clay		271	283
			fine sand layers		283	291
			med. sand some clay layers		291	331
			sand & gravel		331	356
			shale		356	372
			(Use a second sheet if needed)			
18. Elevation:		19. Remarks:		20. 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. Business name _____ License No. _____ Address _____ Signed _____ Authorized representative _____ Date _____		
Topography: ____ Hill ____ Slope ____ Upland ____ Valley						

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Form WWC-5