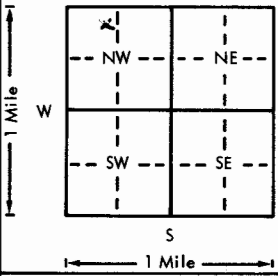


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Haskell | Fraction NE 1/4 NW 1/4 NW 1/4 | Section number 7 | Township number T 28 S | Range number R 32 E | |
| 2. Distance and direction from nearest town or city: 9 3/4 N of Sublette & 1/4 E. Street address of well location if in city: | | | 3. Owner of well: Forrest Cox R.R. or street: City, state, zip code: Sublette, KS | | | |
| 4. Locate with "X" in section below: N W E S 1 Mile | | Sketch map:  | | 6. Bore hole dia. 26 in. Completion date _____ Well depth 577 ft. 12-23-76 | | |
| 5. Type and color of material See attachment | | From | | To | | 7. Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input checked="" type="checkbox"/> Reverse rotary |
| | | | | | | 8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other |
| | | | | | | 9. Casing: Material Steel Height: 5 Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight 36 lbs./ft. Dia. 16 in. to 577 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 219 |
| | | | | | | 10. Screen: Manufacturer's name Brown Type Louvered Dia. 16" Slot/gauze 125 Length 105' Set between 550-520 ft. and 480-455 ft. 440-430 ft. and 420-380 ft. Gravel pack? Yes Size range of material 1/4 x 1/8 |
| | | | | | | 11. Static water level: _____ mo./day/yr. 237 ft. below land surface Date 12-24-76 |
| (Use a second sheet if needed) | | | | | | 12. Pumping level below land surfaces: 295 ft. after _____ hrs. pumping 1451 g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m. |
| | | | | | | 13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____ |
| | | | | | | 14. Well head completion: 12 <input type="checkbox"/> Pitless adapter _____ inches above grade |
| | | | | | | 15. Well grouted? Yes With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft. |
| | | | | | | 16. Nearest source of possible contamination: None ft. _____ Direction _____ Type Observed Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| | | | | | | 17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |
| | | | | | | 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. Henkle Drlg. & Supply 145 Business name _____ License No. _____ Address Box 639 Garden City, KS Signed E. L. Bethwell Date 1-17-77 Authorized representative |
| | | | | | | 18. Elevation: Flat Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley |
| | | | | | | 19. Remarks: |
| | | | | | | |

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5

DRILLERS TEST LOG

CUSTOMERS NAME Forrest Cox DATE 11-12-76
STREET ADDRESS _____ TEST # 1 E. Log
CITY & STATE Sublette, KS DRILLER Martinez
COUNTY Haskell QUARTER NW SECTION 7 TOWNSHIP 28 RANGE 32
LOCATION 100' E. of old well

[illegible]

GARDEN CITY, KS HENKLE DRILLING & SUPPLY CO., INC. SUBLETTE, KS
PHONE 276-3278 IRRIGATION HEADQUARTERS PHONE 675-4311
TEST HOLES*****IRRIGATION AND INDUSTRIAL WELLS*****STOCK WELLS