

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 <u>Stanton</u>	Township name <u>Manter</u>	Fraction <u>SW 4 SW 4 SE 4</u>	Section number <u>27</u>	Town number <u>29 S</u>	Range number <u>42 W.</u>
Distance and direction from nearest town or city: <u>2 miles south + 1/4 mile west of Manter, Ks</u>			3 Owner of well: <u>Milt Graber</u>			
Street address of well location if in city:			Address: <u>Manter Ks.</u>			
Locate with "X" in section below:		Sketch map:				
N						
W						
E						
S						
← 1 Mile →						
2	Type and color of material	From	To	4 Well depth: <u>260</u> ft. Date of completion <u>1-14-75</u> Well diameter <u>9</u> in.		
	<u>Surface</u>	<u>0</u>	<u>10</u>	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		
	<u>sand fine-medium-coarse</u>	<u>10</u>	<u>200</u>	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"/> _____		
	<u>clay + yellow shale</u>	<u>200</u>	<u>230</u>	7 Casing: Material <u>Styrene</u> Height: above/below <u>(below)</u> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>36</u> in. Diam. <u>5"</u> Weight <u>320</u> lbs./ft. <u>3</u> in. to <u>260</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No in. to _____ ft. depth		
	<u>sand stone white dakota</u>	<u>220</u>	<u>260'</u>	8 Screen: Manufacturer <u>San Flower</u> Type <u>Styrene</u> Dia. <u>5"</u> Slot/gauze <u>5/16</u> Length <u>20'</u> Set between <u>240</u> ft. and <u>260</u> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>#1</u>		
				9 Static water level: <u>230</u> ft. below land surface Date <u>1-14-75</u>		
				10 Pumping level below land surfaces: <u>235</u> ft. after <u>18</u> hrs. pumping <u>15</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter unit <input type="checkbox"/> 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 <u>23</u> ft. to <u>13</u> ft.		
				14 Nearest source of possible contamination: ft. <u>100'</u> Direction <u>South</u> Type <u>Sewer</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Aermator</u> Model number <u>SA 12</u> HP <u>1 1/2</u> Volts <u>230</u> Length of drop pipe <u>255</u> ft. capacity <u>15</u> 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		
(use a second sheet if needed)						
16 Remarks: elevation				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. <u>Jim Smith Pump Serv. 1604</u> Business name License No. _____ Address <u>Johnson Ks.</u> Signed <u>Jim Smith</u> Date <u>6-3-75</u> Authorized representative		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						