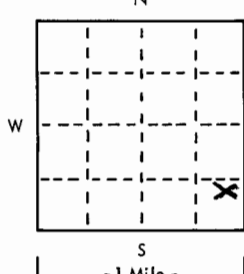


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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

1 Location of well:		County KINGMAN	Township name N 34 E 5 S 5 E	Section number 4	Town number 29 S	Range number 9 W
Distance and direction from nearest town or city: 7 N 1 W Zenker				3 Owner of well: Pauline McKenna		
Street address of well location if in city:				Address: RT 1 Kingman		
Locate with "X" in section below:		Sketch map:		4 Well depth: 26 ft. Date of completion 3-2-76 Well diameter 8 in.		
				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		
2		Type and color of material		From	To	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"/>
		SLITY SAND		0	8	7 Casing: Material PRL Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 26 in. Diam. 4 in. to 26 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 4 in. to 26 ft. depth
		CLAY		8	21	8 Screen: Deerless Manufacturer PRL Dia. 4 Type PRL Slot/gauze 35 Length 5 Set between 21 ft. and 26 ft. Fittings: 5 ON Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 5 ON
		MED SAND		21	25	9 Static water level: 11 ft. below land surface Date 3-2-76
		CLAY		25	26	10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 10 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 20 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 3 ft. to 15 ft.
						14 Nearest source of possible contamination: ft. 100 Direction W Type Creek Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.m.p. 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
16 Remarks: elevation		(use a second sheet if needed)		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. Lyman PROS 140 Business name License No. Address M L Signed W H Lyman Date 3-3-76 Authorized representative		