

MINNEOLA

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

T R EW sec 1/4 1/4 1/4 No.

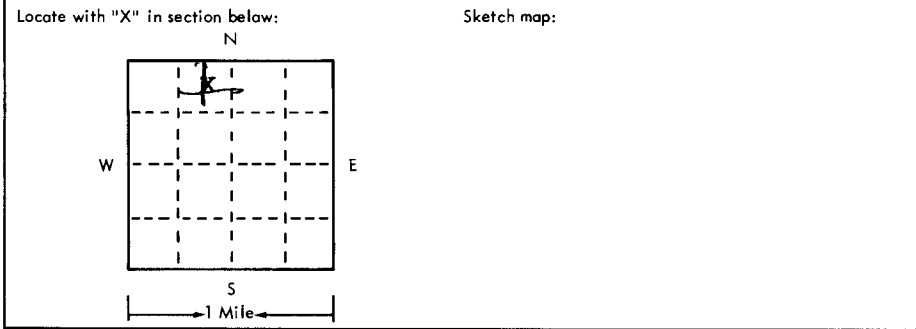
WATER WELL RECORD  
KSA 82a-1201-1215

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

BAA

1 Location of well:	County <b>Clark</b>	Township name <b>Appelton</b>	Fraction <b>NE NE NW NW corner</b>	Section number <b>25</b>	Town number <b>30</b>	Range number <b>25</b>
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Distance and direction from nearest town or city: <b>2 miles N. 1 East of Minneola, Ks.</b>	3 Owner of well: <b>Roy McGee</b>
Street address of well location if in city:	Address: <b>Minneola, Kansas</b>



4 Well depth: **105** ft. Date of completion **6-4-75**  
Well diameter **5** in.

5  Cable tool  Rotary  Driven  Dug  
 Hollow rod  Jetted  Bored  Reverse rotary

6 Use:  Domestic  Public supply  Industry  
 Irrigation  Air conditioning  Commercial  
 Test well

7 Casing: Material **plastic** Height: above/below  
Threaded  Welded  Surface **12** in.  
Diam. **5** in. to **105** ft. depth Drive shoe?  Yes  No  
**5** in. to **105** ft. depth

2 Type and color of material	From	To
Surface	0	3
Brown clay	3	50
Coleche clay	50	55
Fine sand and clay	55	60
Fine sand	60	70
Brown clay and coleche	70	80
Medium sand and gravel	80	88
Coleche clay with very little sand	88	105
<b>NOT TO BRICK</b>		

8 Screen: **30'** screen  
Manufacturer **Superior**  
Type **15%** Dia. **5"**  
Slot/gauze **1/16** Length **4"**  
Set between **75** ft. and **105** ft.  
Fittings:  
Gravel pack  Yes  No Size range of material **7/8**

9 Static water level:  
**85** ft. below land surface Date **6-4-75**

10 Pumping level below land surfaces:  
**90** ft. after **2** hrs. pumping **10** g.p.m.  
ft. after \_\_\_\_\_ hrs. pumping \_\_\_\_\_ g.p.m.  
Estimated maximum yield **10** g.p.m.

11 Water sample submitted:  
 Yes  No Date \_\_\_\_\_

12 Well head completion:  
 Pitless adapter **12** inches above grade

13 Well grouted?  Yes  No  
 Neat cement  Bentonite  
Depth: From **3** ft. to **13** ft.

14 Nearest source of possible contamination:  
ft. **70** Direction **west** Type **septic tank**  
Well disinfected upon completion?  Yes  No

15 Pump:  Not installed  
Manufacturer's name \_\_\_\_\_  
Model number \_\_\_\_\_ HP \_\_\_\_\_ Volts \_\_\_\_\_  
Length of drop pipe \_\_\_\_\_ ft. capacity \_\_\_\_\_ g.m.p.  
Type:  
 Submersible  Turbine  
 Jet  Reciprocating  
 Centrifugal  Other

16 Remarks: elevation

Topography:  
 Hill  
 Slope **TOP**  
 Upland  
 Valley

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.

**Here-Hi Drilling Co 190**  
Business name License No. \_\_\_\_\_  
Address **Box 1442 Dodge City, KS**  
Signed **Carl G. Spittel** Date **6-7-75**  
Authorized representative

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

Form WWC-5