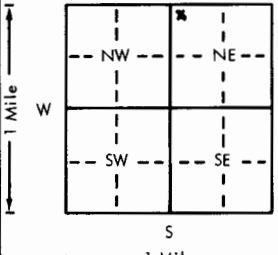


USE TYPEWRITER, OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 NW 1/4 NW 1/4 NE 1/4	Section number 9	Township number T 30 S R 32 E	Range number 32
2. Distance and direction from nearest town or city: 1 E & 1 S of Sublette Street address of well location if in city:			3. Owner of well: Mrs. Ed Hall R.R. or street: Sublette, KS City, state, zip code:		
4. Locate with "X" in section below: N W E S 1 Mile Sketch map: 			6. Bore hole dia. 26 in. Completion date 2-24-77 Well depth 643 ft.		
5. Type and color of material See attachment			7. <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 checked="" type="checkbox"/> Bored <input checked="" type="checkbox"/> Reverse rotary		
			8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
			9. Casing: Material Steel Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 16 in. to 643 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 219		
			10. Screen: Manufacturer's name Brown Louvered Dia. 16" Type <input type="checkbox"/> Slot/gauze .080 Length 140 Set between 460 ft. and 320 ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack Yes Size range of material 1/4 x 1/8		
			11. Static water level: <input type="checkbox"/> mo./day/yr. 233 ft. below land surface Date 2-26-77		
			12. Pumping level below land surfaces: 282 ft. after <input type="checkbox"/> hrs. pumping 1435 g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.		
			13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <input type="checkbox"/>		
			14. Well head completion: <input type="checkbox"/> Pitless adapter 12 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 observed ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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					
(Use a second sheet if needed)					
18. Elevation: Flat Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	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. Henkle Drlg. & Supply Co. Business name License No. <input type="checkbox"/> Address Bx. 639, Garden City, KS Signed E. L. Balthasar Date 2-17-77 Authorized representative		

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

Form WWC-5

DRILLERS TEST LOG

CUSTOMERS NAME Mrs. Edward Hall DATE 1-24-77
STREET ADDRESS _____ TEST # 2 E. LOG ☒
CITY & STATE Sublette, KS DRILLER Martinez
COUNTY Haskell QUARTER NE SECTION 9 TOWNSHIP 30 RANGE 32
LOCATION 200' W of Test #1

[illegible]

GARDEN CITY, KS
Phone 276-3278

HENKLE DRILLING & SUPPLY CO., INC.
IRRIGATION HEADQUARTERS

SUBLETTE, KS
Phone 675-4311

TEST HOLES * * * * * IRRIGATION & INDUSTRIAL WELLS * * * * STOCK WELLS