

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

LXINGTON

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

Berryman #1 Well #2

CWW Invoice No. 11705
DBD

| | | | | | | | |
|---|--|------------------------------------|---------------|---|-----------------------------|---|----------------------------|
| 1 Location of well: | | County Clark | Township name | Fraction SE NW SE | Section number 10 | Town number 31S | Range number 21W |
| Distance and direction from nearest town or city: 10 south of Bucklin 1/2 E, 1/2 S, & left thru gate to location | | | | 3 Owner of well: Sage Drilling Company Rig #2 | | | |
| Street address of well location if in city: | | | | Address: 500 Bitting Bldg. Wichita, Kansas 67202 | | | |
| Locate with "X" in section below: | | Sketch map: | | 4 Well depth: 60 ft. Date of completion 9-24-75 Well diameter 9 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 | | | |
| | | | | 6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> Oil Rig | | | |
| | | | | 7 Casing: Material PVC Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 28 in. Diam. Weight 2.78 lbs./ft. 5 in. to 15 ft. depth! Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 2 in. to 60 ft. depth! | | | |
| 2 | | Type and color of material | | From | To | 8 Screen: | |
| | | Surface | | 0 | 2 | Manufacturer Wesco and sawed pipe Type PVC Dia. 5" Slot/gauze .030 Length 10 10 Set between 35 ft. and 45 ft. Fittings: 1/8 to 3/16 Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material | |
| | | Medium to large sand | | 2 | 15 | 9 Static water level: 9-24-75 20 ft. below land surface Date XXXXXX | |
| | | Gravel and sandy clay 30-70 | | 15 | 60 | 10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 25 g.p.m. | |
| | | | | | | 11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date | |
| | | Block 60' | | | | 12 Well head completion: <input type="checkbox"/> Pitless adapter 28 inches above grade | |
| | | 20' | | | | 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 ____ ft. to 10 ft. | |
| | | 40' | | | | 14 Nearest source of possible contamination: ft. 100 Direction SW Type oil well 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 | | | | | | 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. Carlile Water Well 118 Business name License No. Address Box 275, Liberal, Kansas Signed Edward E. Meam Date 10-3-75 Authorized representative | |
| Topography: | | | | | | <p>2190</p> <p>60</p> <p>21</p> | |
| <input type="checkbox"/> Hill | | | | | | | |
| <input type="checkbox"/> Slope | | | | | | | |
| <input checked="" type="checkbox"/> Upland | | | | | | | |
| <input type="checkbox"/> Valley | | | | | | | |

31 21W 10 NWSE