

3	1	4	3	W	1	8	N	W	S	E	N	E
---	---	---	---	---	---	---	---	---	---	---	---	---

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

NWSE NENE

1 Location of well:		County <b>Morton</b>	Township name <b>Westola</b>	Fraction <b>SE</b>	Section number <b>18</b>	Town number <b>31</b>	Range number <b>43</b>
Distance and direction from nearest town or city:				3 Owner of well: <b>Abner Delay</b>			
Street address of well location if in city:				Address: <b>Manter Kans. 67682</b>			
Locate with "X" in section below:		Sketch map:		<div style="display: flex; justify-content: space-between;"><div style="width: 45%;">4 Well depth: <b>92</b> ft. Date of completion <b>12-25</b> Well diameter <b>13</b> in.</div><div style="width: 45%;">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</div></div> <div style="display: flex; justify-content: space-between;"><div style="width: 45%;">6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/></div><div style="width: 45%;">7 Casing: Material <b>PVC</b> Height: <b>above</b> below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. Diam. <b>10"</b> Weight <b>10"</b> lbs./ft. <b>10"</b> in. to <b>92</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth</div></div>			
<div style="text-align: center;">N  S 1 Mile</div>							
2		Type and color of material	From	To	8 Screen: <b>Wylson Irr. &amp; Pipe Co.</b> Manufacturer <b>Perforated by Oni</b> Type <b>PIC</b> Dia. <b>10"</b> Slot/gauze <b>4"x3"</b> Length <b>30'</b> Set between <b>16</b> ft. and _____ ft. <b>92</b> Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material <b>4"</b>		
		<b>Syrta soils + subsoil</b>	<b>0</b>	<b>20</b>			
		<b>Sand</b>	<b>20</b>	<b>42</b>	9 Static water level: <b>44'</b> ft. below land surface Date <b>12-25-11</b>		
		<b>Gravel</b>	<b>42</b>	<b>60</b>			
		<b>Yellow clay</b>	<b>60</b>	<b>68</b>	10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>180</b> g.p.m.		
		<b>Brown Sandstone - soft</b>	<b>68</b>	<b>90</b>			
		<b>Limestone</b>	<b>90</b>	<b>92</b>	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
					12 Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> _____ inches above grade		
					13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From <b>0</b> ft. to <b>22</b> ft.		
					14 Nearest source of possible contamination: <b>None</b> ft. _____ Direction _____ type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
					15 Pump: Manufacturer's name <b>Fairbanks Morse</b> Model number <b>XL5</b> HP <b>5</b> Volts <b>220</b> Length of drop pipe _____ ft. capacity <b>180</b> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input checked="" 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. <b>Delay Drilling 231</b> Business name _____ License No. _____ Address <b>Manter Kansas</b> Signed <b>Abner Delay</b> Date <b>1-2-12</b> Authorized representative		