

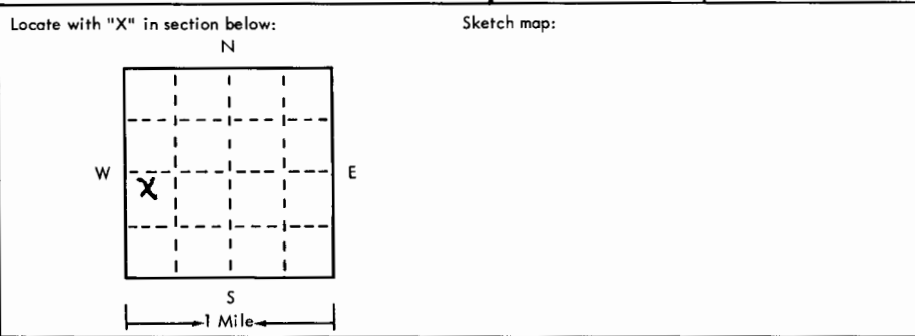
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

1 Location of well: County Har Per Township name _____ Fraction NW SW Section number 2 Town number 305 Range number 9 W

Distance and direction from nearest town or city: 4 1/2 S 3 Owner of well: Graves Drilling Co. Inc
Street address of well location if in city: Leoda, K's Address: 505 Union Center, Wichita, Ks



4 Well depth: 100 ft. Date of completion 8-14-75
Well diameter 7 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 Oil R19

7 Casing: Material PVC Height: 60 ft./below
Threaded Welded Surface 12 in.
Diam. _____ Weight _____ lbs./ft. _____
4 in. to 100 ft. depth Drive shoe? Yes No
_____ in. to _____ ft. depth

2	Type and color of material	From	To
	<u>Top Soil - Clay</u>	<u>0</u>	<u>20</u>
	<u>Sandy Clay</u>	<u>20</u>	<u>50</u>
	<u>Sand - Gravel</u>	<u>50</u>	<u>75</u>
	<u>Clay</u>	<u>75</u>	<u>100</u>

8 Screen: Manufacturer MPI
Type PVC Dia. 4"
Slot/gauze 1/8 Length 20
Set between 60 ft. and 80 ft.
Fittings: 1/8-3/4"
Gravel pack Yes No Size range of material _____

9 Static water level: 42 ft. below land surface Date 8-14-75

10 Pumping level below land surfaces:
_____ ft. after _____ hrs. pumping _____ g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield 30 g.p.m.

11 Water sample submitted:
 Yes No Date _____

12 Well head completion: 12
 Pitless adapter Inches above grade

13 Well grouted? Yes No
 Neat cement Bentonite _____
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:
ft. 75 Direction E Type Oil Test
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
 Upland
 Valley

(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.
Kelly's Water Well Ser 186
Business name _____ License No. _____
Address R 2 Great Bend, Ks
Signed Kelly Duce Date 8-22-75
Authorized representative

31 9W 2 NW SW