

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

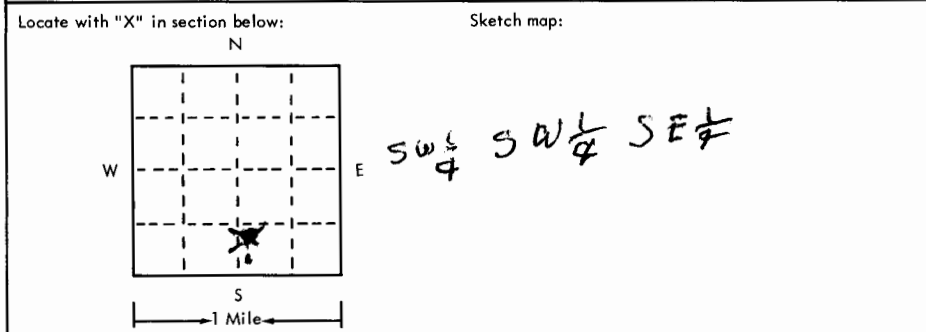
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WATER WELL RECORD
KSA 82a-1201-1215

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

1 Location of well: County **HARPER** Township name _____ Fraction **SW 1/4 SW 1/4 SE 1/4** Section number **10** Town number **315** Range number **4W**

Distance and direction from nearest town or city: **6 S SENDA**
Street address of well location if in city: **1/2 WEST**
3 Owner of well: **Geo MILLER**
Address: **ZENDA, KS**



4 Well depth: **88** ft. Date of completion _____
Well diameter **8** 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 **PC** Height: above/below
Threaded Welded Surface _____ in.
Diam. _____ Weight **40** lbs./ft. _____
4 in. to **98** ft. depth Drive shoe? Yes No
_____ in. to _____ ft. depth

2	Type and color of material	From	To
	SAND	0	3
	CLAY	3	16
	MED SAND	16	34
	CLAY	34	45
	MED SAND	45	49
	CLAY	49	55
	FINE SAND	55	57
	CLAY	57	71
	FINE SAND	71	75
	CLAY	75	80
	Med sand	80	88
	Shale	88	

8 Screen: Manufacturer **Peerless**
Type **PVC** Dia. **4"**
Slot/gauze **0.25** Length **86'**
Set between **30** ft. and **81** ft.
Fittings: Gravel pack Yes No Size range of material **1/2 in**
9 Static water level: **30** ft. below land surface Date **6-3-75**
10 Pumping level below land surfaces:
_____ ft. after _____ hrs. pumping _____ g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield **20** g.p.m.
11 Water sample submitted:
 Yes No Date _____
12 Well head completion:
 Pitless adapter **20** inches above grade
13 Well grouted? Yes No
 Neat cement Bentonite _____
Depth: From **15** ft. to **3** ft.
14 Nearest source of possible contamination:
ft. **200** Direction **WEST** Type **LOT**
Well disinfected upon completion? Yes No
15 Pump: Not installed
Manufacturer's name **JACUZZI**
Model number **554A** HP **1/2** Volts **230**
Length of drop pipe **23** ft. capacity **10** g.p.m.
Type: Submersible Turbine
 Jet Reciprocating
 Centrifugal Other

16 Remarks: elevation _____
Topography:
 Hill
 Slope
 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.
Business name **YMAN BROS** License No. **140**
Address _____
Signed **W. Yman** Date **6-1-75**
Authorized representative