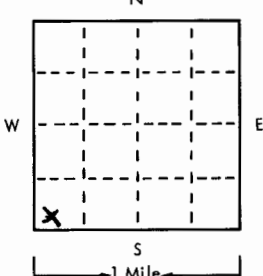


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

3219W11SWSW
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

1 Location of well:	County Comanche	Township name Coldwater	Fraction SW 1/4 SW 1/4	Section number 11	Town number T 32 S	Range number R 19 W
Distance and direction from nearest town or city: 1.35 W. OF Coldwater, Ks. N. Side of rd.			3 Owner of well: Don Kenstetter Address: RFD Protection Coldwater Kans			
Locate with "X" in section below: N  W E S 1 Mile			Sketch map:		4 Well depth: 58 ft. Date of completion 10/17/74 Well diameter 8.5 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 checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well	
					7 Casing: Material PITS Height: <input checked="" type="checkbox"/> above <input type="checkbox"/> below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. Diam. 5 in. to 58 ft. depth! Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No Weight 200 lbs./ft.	
2 Type and color of material			From	To	8 Screen: Manufacturer Sunflower Plastics Type PMP Dia. 5 in Slot/gauze .06 Length 28 Set between 40 ft. and 58 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/8-1/4	
Sandy loam			0	5	9 Static water level: 15 ft. below land surface Date _____	
Sand + clay			5	40	10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 10 g.p.m.	
Sand + gravel			40	58	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 type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 1 ft. to 10 ft.	
					14 Nearest source of possible contamination: None in Area ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					15 Pump: <input 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 checked="" type="checkbox"/> Other Windmill	
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. Lehman & Son 141 Business name Alva Okla License No. _____ Address Coal Hill Date 11/10/75 Signed _____ Authorized representative			
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

32 19 W 11 SW SW SW

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5