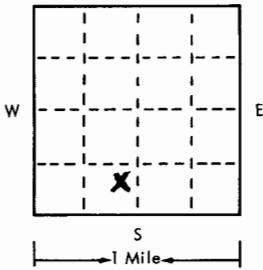


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

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

1 Location of well:	County <b>COMANCHE</b>	Township name <b>PROTECTION NE 1/4 SE 1/4 SW 1/4</b>	Fraction	Section number <b>23</b>	Town number <b>33 S</b>	Range number <b>20 W</b>																														
Distance and direction from nearest town or city: <b>3 S - 1 E of PROTECTION Mo.</b>				3 Owner of well: <b>JAY CHRISTOPHER</b> Address: <b>PROTECTION KS, 67127</b>																																
Locate with "X" in section below: N  W E S 1 Mile				Sketch map:																																
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">2 Type and color of material</th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td><b>BLOW SAND</b></td> <td><b>0</b></td> <td><b>2</b></td> </tr> <tr> <td><b>SANDY CLAY</b></td> <td><b>2</b></td> <td><b>18</b></td> </tr> <tr> <td><b>COARSE SAND</b></td> <td><b>18</b></td> <td><b>24</b></td> </tr> <tr> <td><b>BLUE-BLACK CLAY</b></td> <td><b>24</b></td> <td><b>25</b></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				2 Type and color of material	From	To	<b>BLOW SAND</b>	<b>0</b>	<b>2</b>	<b>SANDY CLAY</b>	<b>2</b>	<b>18</b>	<b>COARSE SAND</b>	<b>18</b>	<b>24</b>	<b>BLUE-BLACK CLAY</b>	<b>24</b>	<b>25</b>																4 Well depth: <b>25</b> ft. Date of completion <b>11-18-75</b> Well diameter <b>2</b> in.		
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				<b>BLOW SAND</b>	<b>0</b>	<b>2</b>																														
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5 <input checked="" type="checkbox"/> Cable tool <input 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 type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input checked="" type="checkbox"/> <b>PASTURE WELL</b>																																				
7 Casing: Material <b>RMP</b> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>18</b> in. Diam. <b>5</b> in. to <b>25</b> ft. depth Weight _____ lbs./ft. _____ _____ in. to _____ ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																				
8 Screen: <b>JESS &amp; LOWEN</b> Manufacturer <b>RMP</b> Dia. <b>5</b> Type <b>SAW</b> Length <b>7 ft</b> Slot/gauze <b>18</b> ft. and <b>25</b> ft. Set between _____ ft. and _____ ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>4-3/4</b>																																				
9 Static water level: <b>8</b> ft. below land surface Date <b>11-18-75</b>																																				
10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.																																				
11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____																																				
12 Well head completion: <input type="checkbox"/> Pitless adapter <b>24</b> inches above grade																																				
13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> <b>CONCRETE</b> Depth: From <b>0</b> ft. to <b>2</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: <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 <b>well is sited on a ridge in lowland pastures near Kiowa Creek</b>																																				
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>Wymen Blacksmith Shop 228</b> Business name _____ License No. _____ Address <b>Protections 67127</b> Signature _____ Date <b>11-18-75</b> Authorized representative																																				

33 20 W 23 NE SE SW