

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

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

1. Location of well:		County <b>Stevens</b>	Fraction <b>NE 1/4 SW 1/4 SE 1/4</b>	Section number <b>10</b>	Township number <b>T 34 S R 36 E/W</b>	Range number <b>36</b>
2. Distance and direction from nearest town or city: <b>43A south of Hugoton, Kan</b> Street address of well location if in city:				3. Owner of well: <b>Carmelita M. Gilbert</b> R.R. or street: City, state, zip code:		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>2 1/2</b> in. Completion date: <b>11/21/76</b> Well depth <b>540</b> ft.		
				7. <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		
				8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
5. Type and color of material				From	To	9. Casing: Material <b>Steel</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>42.5</b> lbs./ft. Dia. <b>1 1/2</b> in. to <b>540</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. <b>1250</b>
<b>Overburden</b>				<b>0</b>	<b>2</b>	10. Screen: Manufacturer's name <b>L.B. Foster</b> Type <b>Steel</b> Dia. <b>1 1/2</b> Slot/gauze <b>1/8</b> Length <b>3</b> Set between <b>270</b> ft. and <b>430</b> ft. <b>460</b> ft. and <b>540</b> ft. Gravel pack? <b>yes</b> Size range of material <b>18-14</b>
<b>Top Soil</b>				<b>2</b>	<b>180</b>	11. Static water level: <b>136</b> ft. below land surface Date <b>11/23/76</b> mg./day/yr.
<b>Med. Sd. &amp; Clay Strks.</b>				<b>180</b>	<b>240</b>	12. Pumping level below land surfaces: <b>NH</b> ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.
<b>Fine &amp; Med. Sd. &amp; Brn. Clay</b>				<b>240</b>	<b>320</b>	13. Water sample submitted: ____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____
<b>Med. Sd. &amp; Clay</b>				<b>320</b>	<b>430</b>	14. Well head completion: <input type="checkbox"/> Pitless adapter <b>NH</b> Inches above grade
<b>Med. Coarse Sd.</b>				<b>430</b>	<b>460</b>	15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.
<b>Fine &amp; Med. Sd. &amp; Clay</b>				<b>460</b>	<b>490</b>	16. Nearest source of possible contamination: ft. ____ Direction ____ Type ____ Well disinfected upon completion? ____ Yes <input checked="" type="checkbox"/> No
<b>Med. &amp; Fine Sd. &amp; Clay</b>				<b>490</b>	<b>540</b>	17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.p.m. 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
<b>Clay</b>				<b>540</b>	<b>560</b>	20. 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>KTM DRILLING, INC.</b> License No. <b>225</b> Business name <b>Box 1785, Gunnor, Okla.</b> Address <b>Box 1785, Gunnor, Okla.</b> Signed <b>Joey Adams</b> Date <b>11/21/76</b> Authorized representative
(Use a second sheet if needed)						
18. Elevation:	19. Remarks: <b>10A Schoenard Tr. 16" steel 11000 slot 430-460' 16A Creep Land</b>					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

37 36 10 10 NE SW SE  
1/4 1/4 1/4 1/4