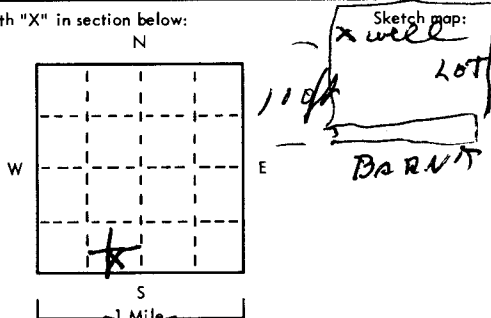


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 HARPER	Township name	Froction SESE SW	Section number 2	Town number 34	Range number 9W
Distance and direction from nearest town or city: 2 NC OR W W			3 Owner of well: Thelma Hewitt			
Street address of well location if in city: 1 1/2 E			Address: ATTICA, KS			
Locate with "X" in section below: 			4 Well depth: 44 ft. Date of completion 11-4-75 Well diameter 4 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 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"/> Commercial <input type="checkbox"/> Test well			
			7 Casing: Material PVC Height: above below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 3 1/2 in. Diam. 4 in. to 4 1/2 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2			8 Screen: Manufacturer Peerless Type PVC Dio. 4 Slot/gauze 0.35 Length 4 1/2 Set between ft. and ft. Fittings: Gravel pack <input type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 			
Type and color of material			9 Static water level: 7 ft. below land surface Date 11-4-75			
			10 Pumping level below land surfaces: ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield 50 g.p.m.			
Soil			11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date 			
Clay			12 Well head completion: <input type="checkbox"/> Pitless adapter N/A inches above grade			
Silty Fine Sand			13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From 0 ft. to 12 ft.			
Med to Coarse Sand			14 Nearest source of possible contamination: ft. 10 Direction ANY Type LOT Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Shale			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			
(use a second sheet if needed)			16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> 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. LYMAN BRGS 140 Business name License No. Address Med Lodge Signed Date 11-6-75 Authorized representative			

34 9W 2 SE SE SW