

sent 11/6/75

T	R	EW	sec 1/4	1/4	1/4	No.
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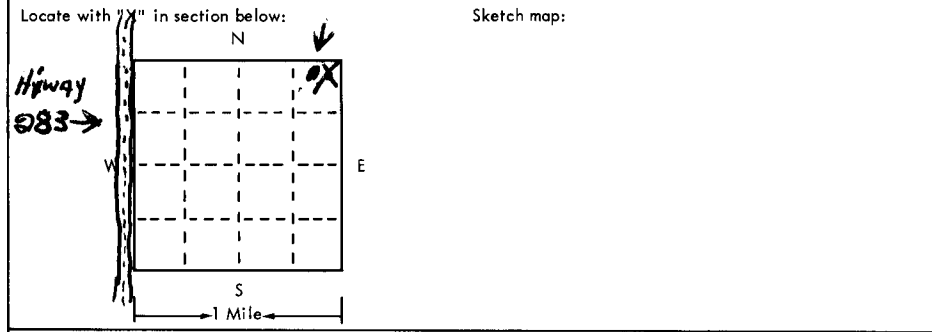
WATER WELL RECORD
KSA 82a-1201-1215
N^{1/4} W^{1/4} N^{1/4} E^{1/4}

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

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

1 Location of well: County **NORTON** Township name _____ Fraction **NE** Section number **11** Town number **3** Range number **23**

Distance and direction from nearest town or city: **1m. South, 1m East of Norton** 3 Owner of well: **Ward B. Smiley**
Street address of well location if in city: _____ Address: **Norton, Ks.**



4 Well depth: **69** ft. Date of completion **7-21-75**
Well diameter **5** 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 **PVC** Height: above/below
Threaded Welded Surface **18** in.
Diam. _____ Weight **224** lbs./ft **100**
5 in. to **69** ft. depth Drive shoe? Yes No
_____ in. to _____ ft. depth

2	Type and color of material	From	To
	Topsoil & yellow clay	0'	8'
	Sand & gravel (grey)	8'	14'
	Sandstone (white) & lime (white)	14'	45'
	fine sand	45'	53'
	WHITE LIME	53'	61'
	Sand & small to medium gravel	61'	70'
	WHITE LIME	70'	72'
	HARD FLINT ROCK	72'	

8 Screen: Manufacturer **JET STREAM**
Type **P.V.C.** Dia. **5"**
Slot gauge **.025** Length **10'**
Set between **69** ft. and **59** ft.
Fittings: _____
Gravel pack Yes No Size range of material **1/8-1/4**

9 Static water level: **60** ft. below land surface Date **7-21-75**

10 Pumping level below land surfaces:
62 ft. after **1** hr. pumping **8** g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield **8** g.p.m.

11 Water sample submitted:
 Yes No Date _____

12 Well head completion:
 Pitless adapter Inches above grade

13 Well grouted? Yes No
 Neat cement Bentonite _____
Depth: From **15** ft. to **0** ft.

14 Nearest source of possible contamination: **SEPTIC**
ft. **300** Direction **WEST** Type **TANK**
Well disinfected upon completion? Yes No

15 Pump: Not installed
Manufacturer's name _____
Model number _____ HP _____ Volts _____
Length of drop pipe _____ ft. capacity _____ g.m.p.
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.
Marvin Well Drilling 220-A
Business name _____ License No. _____
Address **Oxford, Mo**
Signed **Raymond** Date **7-21-75**
Authorized representative