

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 SMITH	Township name	Fraction NW 1/4 NW 1/4 SW 1/4	Section number 28	Town number T 5 S	Range number R 13 W
Distance and direction from nearest town or city: Maylord Kan.			3 Owner of well: Carrol Booz			
Street address of well location if in city: 9 E 3 1/4 S			Address: Portis, Kansas			
Locate with "X" in section below:		Sketch map:		4 Well depth: 55 ft. Date of completion Aug-15-75 Well diameter 30 in.		
				5 <input 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 checked="" 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 <input type="checkbox"/>		
				7 Casing: Material Cement asbestos Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 1 1/2 in. per ft. Diam. 16" Weight 25 lbs./ft. 16" in. to 55 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				8 Screen: Manufacturer Johnsons Type Cement asbestos Dia. 16" Slot/gauze 1/4" Length 26 Set between 29 ft. and 55 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/4"		
				9 Static water level: 20 ft. below land surface Date Aug-12-75		
				10 Pumping level below land surfaces: 30 ft. after 5 hrs. pumping 800 g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 1000 g.p.m.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				12 Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
				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 6 ft. to 18 ft.		
				14 Nearest source of possible contamination: ft. 300 Direction North Type Ditch Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name Western Food Roller Model number _____ HP _____ Volts _____ Length of drop pipe 54 ft. capacity 1000 g.m.p. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
				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. D & D Service 108 Business name License No. Address Doering Kansas Signed Wendell Poppey Date Aug-15-75 Authorized representative		
				<p>(use a second sheet if needed)</p> <p>Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley</p>		