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

	5	15	W	5	SW	NE	NE	
	T	R	EW	sec 1/4	1/4	1/4	No.	

WATER WELL RECORD
KSA 82a-1201-1215

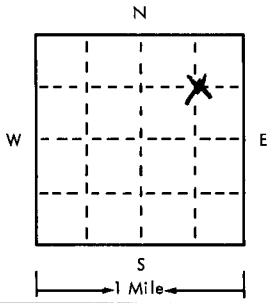
Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County	Township name	Fraction	Section number	Town number	Range number
	Smith	Dow	SW NE NE	5	5	15

Distance and direction from nearest town or city: 5 sd to west Cloudell, Kan.
Street address of well location if in city:

3 Owner of well: Sweat Farms Inc
Address: Cedar, Kan.

Locate with "X" in section below:



Sketch map:

4 Well depth: 42 ft. Date of completion 6-5-75
Well diameter 26 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 CA
Threaded ☐ Welded ☐
Diam. 16 in. to 42 ft. depth
___ in. to ___ ft. depth
Height: above/below Surface 12 in.
Weight 39 lbs./ft.
Drive shoe? ☐ Yes ☑ No

2 Type and color of material	From	To
Clay	0	12
Sand & Gravel Fine to med	12	41
Blue Shale	41	42

8 Screen:
Manufacturer Johnson Casing
Type Slot Dia. 16"
Slot/gauze 30 Length 26
Set between 24 ft. and 42 ft.
Fittings:
Gravel pack ☑ Yes ☐ No Size range of material 40 to 5/8

9 Static water level:
12 ft. below land surface Date 6-5-75

10 Pumping level below land surfaces:
40 ft. after 5 hrs. pumping 600 g.p.m.
40 ft. after 6 hrs. pumping 600 g.p.m.
Estimated maximum yield 600 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 0 ft. to 40 ft.

14 Nearest source of possible contamination:
ft. 100 Direction ___ Type ___
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
☐ Certrifugal ☐ Other

(use a second sheet if needed)

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.
Old Drilling Co. 303
Business name License No.
Address Hillsboro, Kas
Signed Allen A. Fast Date 6-25-75
Authorized representative

5 15 W 5 SW NE NE

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5