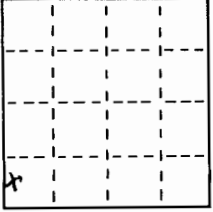


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <u>Osborne</u>	Township name <u>Corinth</u>	Fraction <u>W SW SW</u>	Section number <u>27</u>	Town number <u>T75</u>	Range number <u>R11W</u>
Distance and direction from nearest town or city: <u>5 1/2 S Downs KS</u>			3 Owner of well: <u>Louis Bohm</u>			
Street address of well location if in city:			Address: <u>Downs KS</u>			
Locate with "X" in section below: N  W E S 1 Mile			Sketch map:			4 Well depth: <u>47</u> ft. Date of completion <u>6-11-75</u> Well diameter <u>8</u> 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 <input type="checkbox"/>
						7 Casing: ^{ST/Type} Material <u>Plastic</u> Height: <u>above</u> /below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>18</u> in. Diam. _____ Weight <u>200</u> lbs./ft. <u>5</u> in. to <u>40</u> ft. depth! Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth!
2 Type and color of material			From	To		8 Screen: Manufacturer <u>Jet Stream</u> Type <u>0030</u> Dia. <u>5"</u> Slot/gauze <u>0030</u> Length <u>10'</u> Set between <u>35</u> ft. and <u>45</u> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1/4 - 3/8</u>
<u>TOP soil & clays</u>				<u>0 30</u>		9 Static water level: <u>32</u> ft. below land surface Date <u>6-11-75</u>
<u>Sand & gravel w/ broken rocks</u>				<u>30 44</u>		10 Pumping level below land surfaces: <u>32</u> ft. after <u>1</u> hrs. pumping <u>20</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>50+</u> g.p.m.
<u>shale</u>				<u>44 50</u>		11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____
						12 Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade <u>18</u>
						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 <u>0</u> ft. to <u>15</u> ft.
						14 Nearest source of possible contamination: ft. <u>1100</u> Direction <u>N</u> Type <u>Creek</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
						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
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. <u>MARUHN Well Drilling</u> <u>165</u> Business name _____ License No. _____ Address <u>Red Cloud Ne 68920</u> Signed <u>Perry Maruhn</u> Date <u>6-11-75</u> Authorized representative
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5