

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

T R EW sec 1/4 1/4 1/4 No.

DCC 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>Shelby</u>	Township name <u>Bloomfield</u>	Fraction <u>SW 1/4 SE 1/4</u>	Section number <u>5</u>	Town number <u>7</u>	Range number <u>30</u>
Distance and direction from nearest town or city: <u>3 mi East of Rexford, Ko</u>				3 Owner of well: <u>Cy Stepp</u> Address: <u>Rexford Kansas</u>			
Locate with "X" in section below:		Sketch map:		4 Well depth: <u>228</u> ft. Date of completion: <u>6-28-75</u> Well diameter <u>20</u> 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			
2		Type and color of material		From	To	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	
		<u>top soil</u>		<u>0</u>	<u>95</u>	7 Casing: Material <u>Steel</u> Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. Diam. <u>12 3/4</u> Weight <u>33</u> lbs./ft. + <u>0</u> in. to <u>228</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		<u>fine sand - coarse gravel</u>		<u>95</u>	<u>105</u>	8 Screen: Manufacturer: <u>W.A. Brown</u> Type <u>Lower</u> Dia. <u>12 3/4</u> Slot/gauze <u>7-18</u> Length <u>60</u> Set between <u>168</u> ft. and <u>228</u> Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>4/8 x 5/8</u>	
		<u>fine sand - med gravel</u>		<u>105</u>	<u>115</u>	9 Static water level: <u>90</u> ft. below land surface Date <u>9-24-74</u>	
		<u>sandy clay</u>		<u>120</u>	<u>124</u>	10 Pumping level below land surfaces: <u>225</u> ft. after <u>5</u> hrs. pumping <u>1000</u> g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.	
		<u>fine sand med gravel</u>		<u>124</u>	<u>133</u>	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____	
		<u>sandy clay</u>		<u>133</u>	<u>146</u>	12 Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade	
		<u>fine sand med gravel</u>		<u>146</u>	<u>152</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>10</u> ft.	
		<u>fine sand + clay</u>		<u>152</u>	<u>158</u>	14 Nearest source of possible contamination: ft. ____ Direction ____ Type <u>None</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		<u>fine sand gravel</u>		<u>162</u>	<u>169</u>	15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Douglas</u> Model number <u>6X1672</u> HP <u>80</u> Volts ____ Length of drop pipe <u>210</u> ft. capacity <u>1000</u> g.p.m. 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	
		<u>fine sand gravel (cemented)</u>		<u>169</u>	<u>175</u>	16 Remarks: elevation <u>BROOK 223</u>	
		<u>fine sand med gravel</u>		<u>175</u>	<u>183</u>	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>Blue Jay Drilling Co. Inc</u> License No. <u>284</u> Business name _____ Address <u>Box 503 Celby Ko</u> Signed <u>Maurice Rall</u> Date <u>6-21-75</u> Authorized representative	
		<u>sandy clay</u>		<u>183</u>	<u>205</u>	16 Remarks: elevation <u>BROOK 223</u>	
		<u>fine sand med gravel</u>		<u>205</u>	<u>223</u>	Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	
		<u>Ocher - Shale</u>					

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

Form WWC-5