

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

REC'D

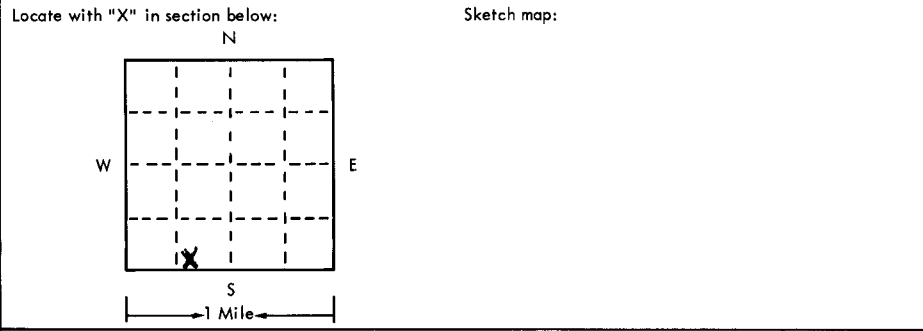
WATER WELL RECORD
KSA 82a-1201-1215

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

CDC

1 Location of well: County SHERMAN Township name GRANT W-SE 1/4 SW 1/4 Fraction 32 Section number 7 Range number 41

Distance and direction from nearest town or city: RULETON 4 N 1 3/4 W Street address of well location if in city: _____
3 Owner of well: FRANK Tubbs Address: KANORADO, KANSAS



4 Well depth: 225 ft. Date of completion 4-16-75
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 Steel Height: above/below _____
Threaded Welded Surface 12 in.
Diam. _____ Weight 33 lbs./ft. L
16 in. to 155 ft. depth Drive shoe? Yes No
_____ in. to _____ ft. depth!

2		Type and color of material	From	To
		<u>GRAVEL</u>	<u>115</u>	<u>131</u>
		<u>SANDY Clay</u>	<u>131</u>	<u>139</u>
		<u>SANDY Clay, SANDSTONE</u>	<u>139</u>	<u>151</u>
		<u>M GRAVEL</u>	<u>151</u>	<u>157</u>
		<u>M GRAVEL, SANDY Clay</u>	<u>157</u>	<u>170</u>
		<u>GRAVEL</u>	<u>170</u>	<u>176</u>
		<u>GRAVEL, CLAY, SANDSTONE</u>	<u>176</u>	<u>207</u>
		<u>FINE SAND, SANDSTONE</u>	<u>207</u>	<u>220</u>
		<u>FINE SAND, SANDY Clay</u>	<u>220</u>	<u>223</u>
		<u>Ochre</u>	<u>223</u>	<u>225</u>

8 Screen: Manufacturer W.A. Brown
Type LUGER Dia. 16
Slot/gauze 18-7 Length 70
Set between 155 ft. and 225 ft. _____
Fittings: Gravel pack Yes No Size range of material 1/4" x 5/8"
9 Static water level: 115 ft. below land surface Date 4-21-75
10 Pumping level below land surfaces:
220 ft. after 6 hrs. pumping 650 g.p.m.
_____ ft. after _____ hrs. pumping _____ g.p.m.
Estimated maximum yield 650 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 10 ft.
14 Nearest source of possible contamination:
ft. _____ Direction _____ Type NONE
Well disinfected upon completion? Yes No
15 Pump: Not installed
Manufacturer's name Westernland Roller
Model number 67M HP 80 Volts _____
Length of drop pipe 210 ft. capacity 650 g.p.m.
Type: Submersible Turbine
 Jet Reciprocating
 Centrifugal Other

16 Remarks: elevation 3791 (TOPO)

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.
St H Dullery & Inc 106
Business name _____ License No. _____
Address Shawnee Kansas
Signed Bill Clifford Date 5-15-75
Authorized representative