

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

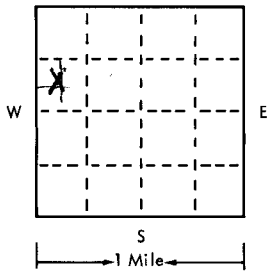
GOODLAND NW

WATER WELL RECORD
KSA 82a-1201-1215

RCB

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

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

1 Location of well:	County <u>SHERMAN</u>	Township name <u>ITASCA NW 1/4 SW 1/4 NW 1/4</u>	Fraction <u>12</u>	Section number <u>8</u>	Town number <u>39</u>	Range number
Distance and direction from nearest town or city: <u>Goodland 2N 5WE 1/4 S</u>				3 Owner of well: <u>HARRY ARMSTRONG</u>		
Street address of well location if in city:				Address: <u>Goodland KANSAS</u>		
Locate with "X" in section below: N  W E S 1 Mile				4 Well depth: <u>249</u> ft. Date of completion <u>9-1-75</u> Well diameter <u>8</u> in.		
2 Type and color of material				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 type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> <u>Stock well</u>		
				7 Casing: Material <u>Plastic</u> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. Diag. <u>4</u> in. to <u>237</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>4</u> in. to <u>237</u> ft. depth		
				8 Screen: Manufacturer <u>Jess + Lowell</u> Type <u>LUGER</u> Dia. <u>5</u> Slot/gauze <u>1/8" x .002</u> Length <u>12</u> Set between <u>237</u> ft. and <u>249</u> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1/8</u>		
				9 Static water level: <u>123</u> ft. below land surface Date <u>9-10-75</u>		
				10 Pumping level below land surfaces: <u>175</u> ft. after <u>2</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.		
				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 type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From <u>0</u> ft. to <u>10</u> ft.		
				14 Nearest source of possible contamination: ft. _____ Direction <u>Pasture</u> Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Red Jacket</u> Model number <u>9BC</u> HP <u>1/2</u> Volts <u>220</u> Length of drop pipe <u>175</u> ft. capacity <u>10</u> g.m.p. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
(use a second sheet if needed)						
16 Remarks: elevation <u>3585 (TOPO)</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>St H Drilling Co Inc 166</u> Business name _____ License No. _____ Address <u>Goodland Kan</u> Signed <u>Bill Clifford</u> Date <u>9-10-75</u> Authorized representative		