

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

GOODLAND

ABQ

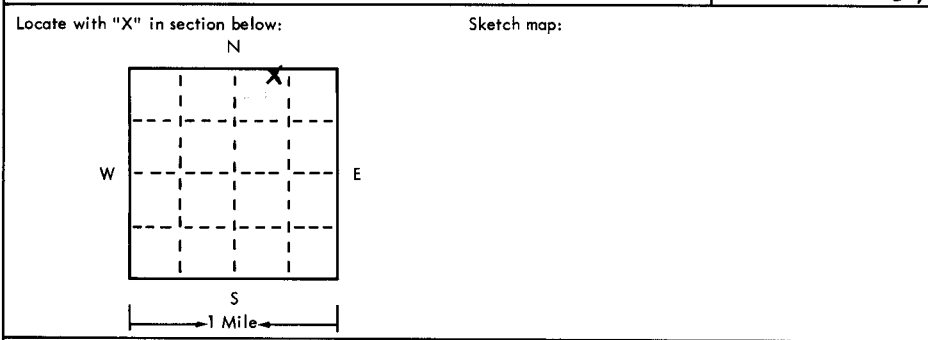
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WATER WELL RECORD  
KSA 82a-1201-1215

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

1 Location of well: County **SHERMAN** Township name **LOGAN** Fraction **NE 1/4** Section number **25** Town number **8** Range number **40**

Distance and direction from nearest town or city: **1 mile west** 3 Owner of well: **BILL LINIVIN**  
Street address of well location if in city: **of GOODLAND** Address: **GOODLAND, KANSAS**



4 Well depth: **265** ft. Date of completion **6-1-75**  
Well diameter **4 1/2** 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 **1 1/2** in.  
Diam. \_\_\_\_\_ Weight **5** lbs./ft. **12**  
**4 1/2** in. to **265** ft. depth Drive shoe?  Yes  No  
\_\_\_\_\_ in. to \_\_\_\_\_ ft. depth

2 Type and color of material		From	To
<b>NO LOG AVAILABLE</b>			

8 Screen:  
Manufacturer **DOERR**  
Type **PERF** Dia. **4 3/8**  
Slot/gauze **1/16** Length **20**  
Set between **255** ft. and **265** ft.  
Fittings:  
Gravel pack  Yes  No Size range of material **4**  
9 Static water level:  
**161** ft. below land surface Date **6-1-75**  
10 Pumping level below land surfaces:  
\_\_\_\_ ft. after \_\_\_\_ hrs. pumping \_\_\_\_ g.p.m.  
\_\_\_\_ ft. after \_\_\_\_ hrs. pumping \_\_\_\_ g.p.m.  
Estimated maximum yield \_\_\_\_ 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 \_\_\_\_ ft. to \_\_\_\_ ft.  
14 Nearest source of possible contamination:  
ft. \_\_\_\_ Direction \_\_\_\_ Type \_\_\_\_  
Well disinfected upon completion?  Yes  No  
15 Pump:  
 Not installed  
Manufacturer's name **Co. 4105**  
Model number **129M412**-HP **1 1/2** Volts **230**  
Length of drop pipe **210** ft. capacity **13** g.m.p.  
Type:  
 Submersible  Turbine  
 Jet  Reciprocating  
 Centrifugal  Other

16 Remarks: elevation **3703 (TOP)**

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.  
**Paust Supply Co Inc 144**  
Business name \_\_\_\_\_ License No. \_\_\_\_\_  
Address **Box 338 Goodland**  
Signed **Ralph Elmer** Date **7-29-75**  
Authorized representative