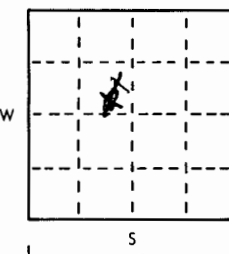


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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 Cloud | Township name SALOMON | Fraction NE SE NW | Section number 15 | Town number T85 | Range number R5W | | |
| Distance and direction from nearest town or city: 2 M West + 1 N + 1/2 W Glasco. | | | 3 Owner of well: John Brock Glasco Ks. | | | | | |
| Street address of well location if in city: | | | Address: | | | | | |
| Locate with "X" in section below: N  W E S 1 Mile | | | Sketch map: BFA | | | 4 Well depth: 41 ft. Date of completion: 7/26 Well diameter: 5 in. | | |
| 2 Type and color of material | | | From | | | To | | |
| | | | Clay (yellow) | | | 1 10 | | |
| Sand stone + Gravel | | | 10 41 | | | 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 checked="" 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 | | |
| | | | | | | 7 Casing: Material Plastic Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. Diam. 5 in. to 41 ft. depth Weight 5 lbs./ft. 5 in. to 41 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| | | | | | | 8 Screen: John Jones Co. Manufacturer: John Jones Co. Type 4 200 Dia. 5 in. Slot/gauze 31 Length 10 ft. Set between 31 ft. and 41 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material | | |
| | | | | | | 9 Static water level: 7 ft. below land surface Date 7/26 | | |
| | | | | | | 10 Pumping level below land surfaces: 7 ft. after 10 hrs. pumping 10 g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 10 g.p.m. | | |
| | | | | | | 11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date | | |
| | | | | | | 12 Well head completion: Windmill <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"/> Neoprene <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From 10 ft. to ____ ft. | | |
| | | | | | | 14 Nearest source of possible contamination: Windmill Direction each way Type ____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | | | | 15 Pump: <input type="checkbox"/> Not installed Manufacturer's name not known Model number ____ HP ____ Volts ____ Length of drop pipe 30 ft. capacity 10 g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input checked="" type="checkbox"/> Other | | |
| 16 Remarks: elevation 1322 Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> 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. Carl Thoman License No. 247 Business name Cousins & Co. Address Glasco Ks. Signed Carl Thoman Date 7/23/15 Authorized representative | | |

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

Form WWC-5