

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

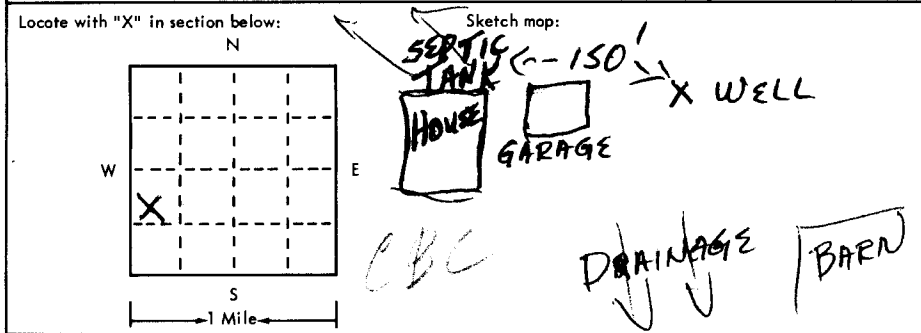
9 3 W 10 S 1/4 NW 1/4  
T R EW sec 1/4 1/4 1/4 No.

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 **OTTOWA** Township name **LOGAN** Fraction **SW 1/4** Section number **10** Town number **T9 S** Range number **R3 W**

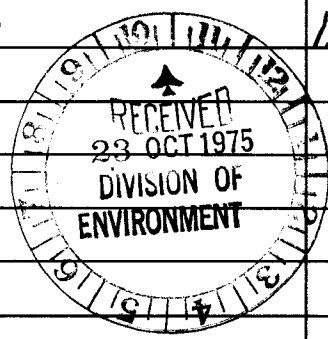
Distance and direction from nearest town or city: **6 EAST**  
Street address of well location if in city: **1/4 NORTH DELPHOS**  
3 Owner of well: **NEVA HILLEBRAND**  
Address: **DELPHOS, KANSAS**



4 Well depth: **130** ft. Date of completion **10/17/75**  
Well diameter **8** 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 **PVC** Height **above** below  
Threaded  Welded  Surface **12** in.  
Diam. **3** lbs./ft. Weight **3** lbs./ft.  
**5** in. to **130** ft. depth Drive shoe?  Yes  No

2	Type and color of material	From	To
	TOPSOIL	0	3
	BROWN CLAY	3	10
	SANDROCK	10	12
	CLAY ALL COLORS	12	44
	BLUE CLAY W/ROCK LAYERS	44	58
	RED CLAY	58	79
	ROCK	79	80
	BLUE CLAY	80	110
	SANDROCK	110	130
	STOP	130	

8 Screen: Manufacturer **CERTAINTEED**  
Type **PERFORATED** Dia. **5"**  
Slot gauze **20/110** Length **20'**  
Set between **130** ft. and **110** ft.  
Fittings: Gravel pack  Yes  No Size range of material **18" 1/4"**  
9 Static water level: **75** ft. below land surface Date **10/17/75**  
10 Pumping level below land surfaces:  
**NO** ft. after **7** hrs. pumping g.p.m.  
**NO** ft. after **7** hrs. pumping g.p.m.  
Estimated maximum yield **25** 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. **150** Direction **WEST** Type **SEPTIC TANK**  
Well disinfected upon completion?  Yes  No  
15 Pump:  Not installed  
Manufacturer's name \_\_\_\_\_  
Model number \_\_\_\_\_ HP \_\_\_\_\_ Volts \_\_\_\_\_  
Length of drop pipe \_\_\_\_\_ ft. capacity \_\_\_\_\_ g.m.p.  
Type:  Submersible  Turbine  
 Jet  Reciprocating  
 Centrifugal  Other



16 Remarks: elevation **~1110** PUMP INSTALLER TO RUN CONCRETE SLAB  
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.  
**Geo Cox + Sons Inc 258**  
Business name \_\_\_\_\_ License No. \_\_\_\_\_  
Address **CLIFTON, KANSAS**  
Signed **Daryl Cox** Date **10/17/75**  
Authorized representative

6  
3 W 10 S NW 1/4  
MS 82a-1201-1215 SW