

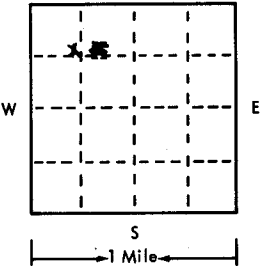
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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

*BBB*

1 Location of well:	County <b>Sheridan</b>	Township name <b>Solomon</b>	Xaction <b>SE 1/4 NW 1/4 11 9</b>	Section number <b>11</b>	Town number <b>9</b>	Range number <b>30W</b>		
Distance and direction from nearest town or city: <b>From Sequin, Ks. 3 1/4 miles South; 2 3/4 miles West</b> Street address of well location if in city:			3 Owner of well: <b>Baalman Farms</b> Address: <b>Hoxie, Kansas</b>					
Locate with "X" in section below: N  W E S 1 Mile			Sketch map:			4 Well depth: <b>205</b> ft. Date of completion <b>1/16/76</b> Well diameter <b>30</b> in.		
2 Type and color of material			From	To	5 <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary			
			<b>Soil, sand &amp; clay</b>		<b>0</b>	<b>100</b>	6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>	
			<b>Sandstone</b>		<b>100</b>	<b>105</b>	7 Casing: Material <b>Steel</b> Height: above <b>12</b> in. Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. Diam. <b>16</b> in. to <b>115</b> ft. depth Weight _____ lbs./ft. _____ Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth	
			<b>Sandy clay</b>		<b>105</b>	<b>123</b>	8 Screen: Manufacturer <b>Brown</b> : <b>10'</b> Cook Type <b>Regular</b> Dia. <b>16"</b> Slot/gauze <b>10%</b> Length <b>80'</b> Set between <b>115</b> ft. and <b>195</b> ft. <b>205</b> Fittings: <b>1/2 X 5/8 : 50% #1</b> Gravel pack <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material _____	
			<b>Medium sand</b>		<b>123</b>	<b>129</b>	9 Static water level: <b>102</b> ft. below land surface Date <b>1/19/76</b>	
			<b>Cemented sandy clay</b>		<b>129</b>	<b>134</b>	10 Pumping level below land surfaces: <b>195</b> ft. after <b>2</b> hrs. pumping <b>672</b> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>672</b> g.p.m.	
			<b>Clay</b>		<b>134</b>	<b>137</b>	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
			<b>Gravel</b>		<b>137</b>	<b>153</b>	12 Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> <b>12</b> Inches above grade	
			<b>Rock</b>		<b>153</b>	<b>156</b>	13 Well grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> <b>clay</b> Depth: From <b>0</b> ft. to <b>10</b> ft.	
			<b>Sandy clay</b>		<b>156</b>	<b>166</b>	14 Nearest source of possible contamination: ft <b>3900</b> Direction <b>East</b> Type <b>Feedlot</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
			<b>Medium sand</b>		<b>166</b>	<b>174</b>	15 Pump: <input type="checkbox"/> Not installed <b>2-27-76</b> Manufacturer's name <b>Bryon Jackson</b> Model number <b>7149</b> HP <b>75</b> Volts _____ Length of drop pipe <b>195</b> ft. capacity _____ g.p.m. Type <b>8 stage 10" GH bowl</b> <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
			<b>Sand stone</b>		<b>174</b>	<b>177</b>	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. <b>Western Well and Pump 245</b> Business name _____ License No. _____ Address: <b>PO Box 852 Colby, Ks.</b> Signed <b>Dally Berry</b> Date <b>3/22/76</b> Authorized representative	
			<b>Gravel</b>		<b>177</b>	<b>182</b>		
			<b>Cemented sandy clay</b>		<b>182</b>	<b>188</b>		
			<b>Gravel</b>		<b>188</b>	<b>197</b>		
			<b>Yellow clay &amp; shale</b>		<b>197</b>	<b>210</b>		
(use a second sheet if needed)								
16 Remarks: elevation <b>Brook 197</b>			17 Water well contractor's certification:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley								

9 30W 11 SE NW 1/4