

75

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 POTAWATOMIE	Township name Wamego	Fraction NW 1/4	Section number 6	Town number 10	Range number 10
Distance and direction from nearest town or city: 3 n.w Wamego Kansas				3 Owner of well: HUPPE			
Street address of well location if in city:				Address: Wamego, Kansas			
Locate with "X" in section below:		Sketch map:		Well depth: 100 ft. Date of completion 5-2-75		Well diameter 12 in.	
				<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	
2		Type and color of material		From	To	4 Casing: Material PVC Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. Diam. 5 in. to 100 ft. depth! Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 5 in. to 100 ft. depth!	
		TOP SOIL		0	5	8 Screen: Manufacturer Pumped Type PVC Dia. 5" Slot 0.25 Length 10' Set between 60 ft. and 70 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material #3	
		YELLOW CLAY		5	40	9 Static water level: NOT MEASURED ft. below land surface Date	
		Blue "		40	60	10 Pumping level below land surfaces: Air Test ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield 5 g.p.m.	
		Fine Sand		60	68	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date	
		Rock shale		68	100	12 Well head completion: Capped <input type="checkbox"/> Pitless adapter 24 Inches above grade	
						13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From 0 ft. to 10 ft.	
						14 Nearest source of possible contamination: ft. 200 Direction EAST Type SEPTIC TANK Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
						15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
16 Remarks: elevation 1065						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. Strader Drilling Co. Inc. #182 Business name _____ License No. _____ Address 8475 N. Holton, KANSAS Signed Dale Jackson Date 5-4-75 Authorized representative	

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

Form WWC-5