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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

1 Location of well:	County Pottawatomie	Township name Wamego	Fraction Tract NW 1/4	Section number 6	Town number 10	Range number 10 E
Distance and direction from nearest town or city: 3 NW Wamego, Ks			3 Owner of well: HUPPE			
Street address of well location if in city:			Address: Wamego, Ks			
Locate with "X" in section below:		Sketch map:		4 Well depth: 100 ft. Date of completion 5-2-75 Well diameter 12 in.		
2 Type and color of material		From	To	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		
TOP SOIL		0	5	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		
YELLOW CLAY		5	40	7 Casing: Material PVC Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. Diam. Weight 2.33 lbs./ft. 5 in. to 100 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
BLUE CLAY		40	60	8 Screen: PumpCo Manufacturer: PVC Dia. 5" Slot/Length: 0.25 / 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		
FINE SAND		60	68	9 Static water level: NOT MEASURED ___ ft. below land surface Date ___		
ROCK SHALE		68	100	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.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ___		
				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 Depth: From 0 ft. to 10 ft.		
				14 Nearest source of possible contamination: ft. 150 Direction SOUTH 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.p.m. 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 1150				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 Rt. 75N Holton, KANS. Signed Dale Holton Date 5-1-75 Authorized representative		

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

Form WWC-5