

USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
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WATER WELL RECORD  
KSA 82a-1201-1215

Kansas Department of Health and  
Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

Permit # 26374

1. Location of well:		County <b>Pottawatomie</b>	Fraction <b>SE 1/4 SE 1/4 NW 1/4</b>	Section number <b>3</b>	Township number <b>T 10 S</b>	Range number <b>R 11 W</b>
2. Distance and direction from nearest town or city: <b>1/2 mile South of Belvue, Ks.</b> Street address of well location if in city:				3. Owner of well: <b>Wolff Foundation</b> R.R. or street: <b>1st Nat'l. Bank-Trust Dept. Bx. 88</b> City, state, zip code: <b>Topeka, Kansas 66601</b>		
4. Locate with "X" in section below: <p>Sketch map: <b>U.S. 24</b> <b>Belvue</b> <b>DRAINAGE</b></p>				6. Bore hole dia. <b>30</b> in. Completion date <b>3-24-76</b> Well depth <b>71</b> ft.		
5. Type and color of material				7. <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		
				8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
				<input checked="" type="checkbox"/> Casing: Material <b>Transite</b> Height: <b>Above or below</b> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <b>16</b> in. to <b>32</b> ft. depth <b>12</b> in. or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth <b>75</b> ft.		
				<input checked="" type="checkbox"/> Screen: Manufacturer's name <b>Johnson Well Co.</b> Type <b>Transite</b> Dia. <b>16</b> Slot/gauze <b>1/8x8</b> Length <b>39'</b> Set between <b>71</b> ft. and <b>32</b> ft. ft. and <input type="checkbox"/> ft.		
				Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>5/8</b>		
				11. Static water level: <b>19</b> ft. below land surface Date <b>4-1-76</b> mo./day/yr.		
				12. Pumping level below land surfaces: <b>25</b> ft. after <b>1</b> hrs. pumping <b>1000</b> g.p.m. <b>29</b> ft. after <b>4</b> hrs. pumping <b>1200</b> g.p.m. Estimated maximum yield <b>2500</b> g.p.m.		
				13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/> mo./day/yr.		
				14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
				15. Well grouted? <b>yes</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.		
				16. Nearest source of possible contamination: ft. <b>4000</b> Direction <b>west</b> Type <b>river</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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		
				(Use a second sheet if needed)		
18. Elevation:		19. Remarks: <b>We do not install pump.</b>		20. 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>Hoobler Drilling Co.</b> <b>323</b> Business name License No. Address <b>St. Marys, Ks. 66536</b> Signed <b>Dan Hoobler</b> Date <b>4-6-76</b> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5