

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

collected topsoil well had been plotted on map

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 <u>Jefferson</u>	Township name <u>Rock Creek</u>	Fraction <u>TRACT E 1/2 of NE 1/4</u>	Section number <u>3</u>	Town number <u>10</u>	Range number <u>17 E</u>
Distance and direction from nearest town or city: <u>1 1/2 W. - 1 1/4 S</u>				3 Owner of well: <u>WITTMER Real Estate Co.</u>			
Street address of well location if in city: <u>Ozawakie, Ks.</u>				Address: <u>1136 S.W. WANAMAKER Topeka Kansas</u>			
Locate with "X" in section below:		Sketch map:		4 Well depth: <u>100</u> ft. Date of completion <u>7-14-75</u> Well diameter <u>12</u> in.			
				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			
				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 <input type="checkbox"/>			
				7 Casing: Material <u>PVC</u> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in. Diam. <u>5</u> in. to <u>10</u> ft. depth! Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth!			
2		Type and color of material		From	To	8 Screen:	
		<u>Top Soil</u>		<u>0</u>	<u>5</u>	Manufacturer <u>Pump Co</u>	
		<u>Yellow Clay</u>		<u>5</u>	<u>8</u>	Type <u>PVC</u> Dia. <u>5"</u>	
		<u>Coarse sand</u>		<u>8</u>	<u>36</u>	Slot/size <u>1080</u> Length <u>10</u>	
		<u>Fine sand</u>		<u>36</u>	<u>52</u>	Set between <u>90</u> ft. and <u>100</u> ft.	
		<u>Coarse sand &amp; Boulders</u>		<u>52</u>	<u>80</u>	Fittings:	
		<u>Fine sand - coarse sand</u>		<u>80</u>	<u>100</u>	Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>#3</u>	
						9 Static water level: <u>No T measurement</u> ___ ft. below land surface Date ___	
						10 Pumping level below land surfaces: <u>Air Test</u> ___ ft. after ___ hrs. pumping ___ g.p.m. ___ ft. after ___ hrs. pumping ___ g.p.m. Estimated maximum yield <u>20</u> g.p.m.	
						11 Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date ___	
						12 Well head completion: <u>Capped</u> <input type="checkbox"/> Pitless adapter <u>24</u> <input checked="" type="checkbox"/> 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 <u>0</u> ft. to <u>10</u> ft.	
						14 Nearest source of possible contamination: ft. <u>900</u> Direction <u>N.E.</u> Type <u>S. Tank</u> Well disinfected upon completion? <input 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				17 Water well contractor's certification:			
Topography: <u>945</u> <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Strader Drilling Co Inc 182</u> Business name License No. ___ Address <u>3 FD 1 Holton, Kansas</u> Signed <u>DeB Robinson</u> Date <u>7-17-75</u> Authorized representative			

10 17E 3 SW NE NE

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