

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: <u>Geary</u>	Township name: <u>Milford</u>	Fraction: <u>TRCT. NE 1/4</u>	Section number: <u>32</u>	Town number: <u>105</u>	Range number: <u>5 E</u>
Distance and direction from nearest town or city: <u>8 N. JCT. CITY Ks.</u>			3 Owner of well: <u>DICK ROTHFUS # 3</u>			
Street address of well location if in city:			Address: <u>1012 Highland J.C. KANS.</u>			
Locate with "X" in section below:		Sketch map:		4 Well depth: <u>140</u> ft. Date of completion _____ Well diameter <u>8</u> in. <u>2-13-75</u>		
N W ——— E S 1 Mile				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		
2 Type and color of material		From	To	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"/> _____		
<u>Top Soil</u>		<u>0</u>	<u>3</u>	7 Casing: Material <u>PVC</u> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in. Diam. _____ Weight <u>2.33</u> lbs./ft. _____ <u>5</u> in. to <u>140</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth!		
<u>Fine Sand</u>		<u>3</u>	<u>29</u>	8 Screen: Manufacturer <u>PumpCo.</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze _____ Length <u>20</u> Set between <u>120</u> ft. and <u>140</u> ft. _____ Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1/2 X 5</u>		
<u>Blue Shale</u>		<u>29</u>	<u>41</u>	9 Static water level: <u>No Measurement</u> _____ ft. below land surface Date _____		
<u>White Limestone</u>		<u>41</u>	<u>47</u>	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>15</u> g.p.m.		
<u>Blue Shale</u>		<u>47</u>	<u>68</u>	11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
<u>" " &amp; Lime</u>		<u>68</u>	<u>88</u>	12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>24</u> <input type="checkbox"/> Inches above grade		
<u>" Shale</u>		<u>88</u>	<u>97</u>	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.		
<u>Grey Limestone</u>		<u>97</u>	<u>108</u>	14 Nearest source of possible contamination: ft. <u>150</u> Direction <u>South</u> Type <u>SEPTIC TANK</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<u>" Shale</u>		<u>108</u>	<u>125</u>	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		
<u>White Loose Limestone</u>		<u>125</u>	<u>127</u>	16 Remarks: elevation		
<u>Grey Limestone</u>		<u>127</u>	<u>136</u>	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. <u>Strader Drilling Co. Inc. #182</u> Business name License No. _____ Address <u>RR1-Hy75N Holton, KANS.</u> Signed <u>Walt Baker</u> Date <u>2-21-75</u> Authorized representative		
<u>Blue Shale</u>		<u>136</u>	<u>140</u>	Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		
(use a second sheet if needed)						

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

Form WWC-5