

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

LOT # 65

1. Location of well:		County Geary	Fraction SE 1/4 SE 1/4 SE 1/4	Section number 32	Township number T 10 S	Range number R 5 E/W	
2. Distance and direction from nearest town or city: 2 SE OF Street address of well location if in city: MILFORD			3. Owner of well: RICHARD ROTHFUS R.R. or street: RFD 3 City, state, zip code: JUNCTION CITY				
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 		6. Bore hole dia. 8 in. Completion date 8-26-77 Well depth 160 ft.			
5. Type and color of material		From		To		7. 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	2	8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
		SANDY, SILT		2	18	9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 29 in. RMP <input type="checkbox"/> PVC 44 Weight 250 lbs./ft. Dia. 5 in. to 160 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. 258	
		CLAY, BROWN		18	32	10. Screen: Manufacturer's name PUMCO MPJ Type PVC Dia. 5 Gauge 020 Length 20 Set between 120 ft. and 140 ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 030/060	
		GREY LIMESTONE, FLINTY		32	41	11. Static water level: <input type="checkbox"/> mo./day/yr. 130 ft. below land surface Date 8-26-77	
		SHALE, GREY, RED		41	98	12. Pumping level below land surfaces: ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 20 g.p.m.	
		LIMESTONE, GREY, FLINTY		98	131	13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
		LIMESTONE, YELLOW, LOOSE		131	134	14. Well head completion: CAP <input type="checkbox"/> Pitless adapter 29 inches above grade	
		SHALE, BLK, GREY, LIMESTONE		134	160	15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.	
						16. Nearest source of possible contamination: ft. 150 Direction S Type SEPTIC Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input 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			
18. Elevation: Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: OWNER TO INSTALL SLAB		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. STRADER DRILL CO 183 Business name License No. Address HORTON, KS Signed Dale Peterson Date 9-1-77 Authorized representative			

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

Form WWC-5