

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

WATER WELL RECORD  
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

1 Location of well:		County <u>Butler</u>	Township name <u>Tomie Blue</u>	Fraction <u>NE 1/4</u> <u>NE 1/4</u>	Section number <u>#10</u>	Town number <u>10</u>	Range number <u>8</u>
Distance and direction from nearest town or city: <u>3 E - 1/4 S</u>				3 Owner of well: <u>RAY Stephenson</u>			
Street address of well location if in city: <u>MANHATTAN, K.S.</u>				Address: <u>RT1 ST. Geo. K's</u>			
Locate with "X" in section below:		Sketch map:		4 Well depth: <u>50</u> ft. Date of completion <u>12-3-75</u> Well diameter <u>10</u> in.			
				<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>5</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 _____ lbs./ft. _____ <u>5</u> in. to <u>50</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ in. to _____ ft. depth	
		<u>Brown Clay</u>		<u>5</u>	<u>20</u>	8 Screen: Manufacturer <u>Pump Co</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauge <u>1080</u> Length <u>5</u> Set between <u>45</u> ft. and <u>30</u> ft.	
		<u>Fine Sand</u>		<u>20</u>	<u>30</u>	Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1/4 x 1/8</u>	
		<u>Blue Clay</u>		<u>30</u>	<u>40</u>	9 Static water level: <u>25</u> ft. below land surface Date <u>12-3-75</u>	
		<u>COARSE SAND - GRAVEL</u>		<u>40</u>	<u>50</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>30</u> g.p.m.	
						11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
						12 Well head completion: <u>Capped</u> <input type="checkbox"/> Pitless adapter <input 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>100</u> Direction <u>E</u> Type <u>S. Tank</u> <u>MHC</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 <u>1010</u>		Owner to install well slab					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		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>STANBEE DRILLING CO INC 182</u> Business name _____ License No. _____ Address <u>RT1 HOLTON KS.</u> Signed <u>Dale Ardison</u> Date <u>2-4-79</u> Authorized representative					

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SE NW SE