

To BWS 10-13-78

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

WATER WELL RECORD  
KSA 82a-1201-1215

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

1. Location of well:	County <b>POTAWATOMIE</b>	Fraction <b>NW 1/4 NW 1/4 NW 1/4</b>	Section number <b>10</b>	Township number <b>T 10 S R</b>	Range number <b>8 E W</b>
2. Distance and direction from nearest town or city: <b>2.5 E .6 N</b>			3. Owner of well: <b>LARRY SCHMIDT (Timber Creek)</b>		
Street address of well location if in city: <b>OF MANHATTAN, KS.</b>			R.R. or street: <b>1611 LARAMIE</b>		
			City, state, zip code: <b>MANHATTAN, KS 66502</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>7.8</b> in. Completion date _____	
				Well depth <b>63</b> ft. <b>8-24-78</b>	
				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	
				8. Use: <input type="checkbox"/> Domestic <input checked="" 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	
				9. Casing: Material <b>PVC</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>36</b> in. RMP <input type="checkbox"/> PVC <b>9L</b> Weight <b>6.81</b> lbs./ft. Dia. <b>8</b> in. to <b>53</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>410</b>	
5. Type and color of material		From	To	10. Screens: Manufacturer's name <b>JOHNSON STAINLESS STEEL</b>	
<b>TOP SOIL</b>		<b>0</b>	<b>4</b>	Type <b>STAINLESS STEEL</b> Dia. <b>8</b>	
<b>CLAY, BROWN</b>		<b>4</b>	<b>41</b>	Slot gauge <b>100</b> Length <b>10 FT</b>	
<b>FINE SAND - COURSE SAND (CLEAN)</b>		<b>41</b>	<b>47</b>	Set between <b>53</b> ft. and <b>63</b> ft.	
<b>FINE SAND - COURSE SAND - med gravel, Pea gravel</b>		<b>47</b>	<b>63</b>	Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/4 X 1/8</b>	
<b>SHALE, GREY</b>		<b>63</b>	<b>67</b>	11. Static water level: _____ mo./day/yr. <b>35</b> ft. below land surface Date <b>8-24-78</b>	
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>500</b> g.p.m.	
				13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date _____	
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>36"</b> Inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>30</b> ft.	
				16. Nearest source of possible contamination: ft. <b>300</b> Direction <b>N</b> Type <b>CREEK</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: _____ Not installed Manufacturer's name <b>JACUZZI</b> Model number <b>1556H4</b> HP <b>15</b> Volts <b>230</b> Length of drop pipe <b>49</b> ft. capacity <b>280</b> g.p.m. Type: <input checked="" 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:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley	<b>SLAB INSTALLED 6X6X6</b>		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <b>STAADER DRIG CO 182</b> Business name License No. Address <b>RT 1, HOLTAN, KS</b> Signed <b>Dale Rubin</b> Date <b>9-20-78</b> Authorized representative		

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

Form WWC-5