

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 POTTAWATOMIE | Fraction NW 1/4 NW 1/4 NW 1/4 | Section number 11 | Township number T 10 S R 8 E/W | Range number 8 | |
| 2. Distance and direction from nearest town or city: Street address of well location if in city: | | | 3. Owner of well: RAY STEPHSON R.R. ST. George, KS City, state, zip code: 66535 | | | | |
| 4. Locate with "X" in section below: | | Sketch map: | | | | 6. Bore hole dia. 10 in. Completion date _____ Well depth 40 ft. 4-19-77 | |
| | | <p>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</p> <p>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</p> <p>9. Casing: Material PVC Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 29 in. RMP <input type="checkbox"/> PVC 9L Weight 2.58 lbs./ft. Dia. 5 in. to 40 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 258</p> | | | | | |
| | | | | | | 5. Type and color of material | |
| | | TOP SOIL | | 0 6 | | 11. Static water level: _____ mo./day/yr. 26 ft. below land surface Date 4-19-77 | |
| | | SANDY CLAY | | 6 30 | | 12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 30 g.p.m. | |
| | | FINE SAND-COURSE SAND-GRAVEL | | 30 40 | | 13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____ | |
| | | | | | | 14. Well head completion: CAP <input type="checkbox"/> Pitless adapter 29 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 5 ft. to 15 ft. | |
| | | | | | | 16. Nearest source of possible contamination: ft. 150 Direction W 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 _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ 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: | | 19. Remarks: owner will instal 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 DRUG CO INC 182 Business name License No. _____ Address RT 1 HOTTAW, KS Signed Dale Baker Date 4-20-77 Authorized representative | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley | | | | | | | |

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