

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 SE 1/4 SE 1/4 SE 1/4	Section number 4	Township number T 10 S R 9 E/W	Range number 9
2. Distance and direction from nearest town or city: 6 W - 5 S			3. Owner of well: JAMICE BUSSART			
Street address of well location if in city: CFWAMEGE			R.R. or street: City, state, zip code: MANHATTAN, KANSAS			
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. 1 1/2 in. Completion date _____ Well depth 115 ft. 5-11-76	
					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	
5. Type and color of material		From	To	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		
Topsoil		0	6	9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 2 1/2 in. RMP PVC 9L Weight 2.55 lbs./ft. Dia. 5 in. to 115 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 258		
Sandy clay		6	50	10. Screen: Manufacturer's name _____ Type PVC Dia. 5" Slot/gauze .020 Length 10' Set between 103 ft. and 113 ft. _____ ft. and _____ ft.		
Fine sand - coarse sand		50	115	Gravel pack? <input checked="" type="checkbox"/> Size range of material .20 to .06		
				11. Static water level: _____ mo./day/yr. 80 ft. below land surface Date 5-11-76		
				12. Pumping level below land surfaces: Air test _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 30 g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
				14. Well head completion: CAFFED _____ Pitless adapter 24 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 12 ft. to 10 ft.		
				16. Nearest source of possible contamination: SEPTIC ft. 100 Direction E 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		
				(Use a second sheet if needed)		
18. Elevation:	19. Remarks: OWNER WILL 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 DRUG CO INC 182 Business name _____ License No. _____ Address RT 1 HOLTON KS Signed Rob. Ashen Date 5-12-76 Authorized representative		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						