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

WATER WELL RECORD
KSA 82a-1201-1215

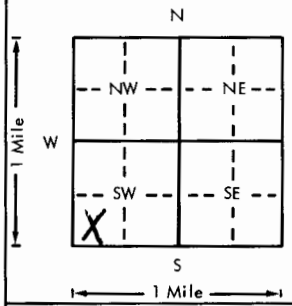
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	POTTAWATOMIE	SW 1/4 SW 1/4 SW 1/4	11	T 10 S	R 9 E/W

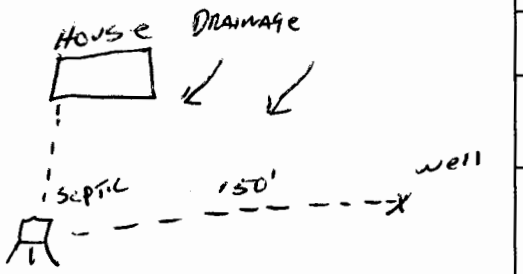
2. Distance and direction from nearest town or city: 1.5 E OF
Street address of well location if in city: ST. GEORGE

3. Owner of well: RICHARD JOHNSON
R.R. or street:
City, state, zip code: BOX 109 OHSBURG, KAN.

4. Locate with "X" in section below:



Sketch map:



6. Bore hole dia. 12 in. Completion date
Well depth 80 ft. 4-14-78

7. ___ Cable tool ✓ Rotary ___ Driven ___ Dug
___ Hollow rod ___ Jetted ___ Bored ___ Reverse rotary

8. Use: ✓ Domestic ___ Public supply ___ Industry
___ Irrigation ___ Air conditioning ___ Stock
___ Lawn ___ Oil field water ___ Other

9. Casing: Material PVC Height: (Above) or below
Threaded ___ Welded ___ Surface 24 in.
RMP ___ PVC 9L Weight 2.58 lbs./ft.
Dia. 5 in. to 80 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. 1274

5. Type and color of material	From	To
TOP SOIL	0	6
FINE SAND	6	43
LIMESTONE, GREY, SHALE, GREY	43	80

10. Screen: Manufacturer's name PUMPCO, MFI
Type PVC Dia. 5
Slot/gauze .020 Length 20
Set between 30 ft. and 50 ft.
ft. and ft.
Gravel pack? ✓ Size range of material .030 X .080

11. Static water level: mo./day/yr.
25 ft. below land surface Date 4-14-78

12. Pumping level below land surfaces:
ft. after hrs. pumping g.p.m.
ft. after hrs. pumping g.p.m.
Estimated maximum yield 10 g.p.m.

13. Water sample submitted: mo./day/yr.
___ Yes ✓ No Date

14. Well head completion: CAP
___ Pitless adapter 24 Inches above grade

15. Well grouted? ✓
With: ✓ Neat cement ___ Bentonite ___ Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination:
ft. 150 Direction W Type SEPTIC
Well disinfected upon completion? ✓ Yes ___ No

17. Pump: ✓ Not installed
Manufacturer's name
Model number HP Volts
Length of drop pipe ft. capacity g.p.m.
Type:
___ Submersible ___ Turbine
___ Jet ___ Reciprocating
___ Centrifugal ___ Other

(Use a second sheet if needed)

18. Elevation:

Topography:
___ Hill
✓ Slope
___ Upland
___ Valley

19. Remarks:
OWNER TO 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 DRLG CO 182
Business name License No.
Address RT 1 HOLTON, KS
Signed Dale Askren Date 4-18-78
Authorized representative

T 10 R 9 E/W Sec 11 1/4 1/4 1/4 SWSWSW

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

Form WWC-5

MI-1023