

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

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

WATER WELL RECORD  
KSA 82a-1201-1215

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

CCO  
SE SW SW

1 Location of well: County WABAUNSEE Township name NEPA Fraction SE 1/4 SW 1/4 Section number 35 Town number 11 S Range number 10 E

Distance and direction from nearest town or city: 2 N - 1/2 E - 1/2 N 3 Owner of well: Bob Schmitz, J.P.

Street address of well location if in city: CF Alma Address: Alma, KS

Locate with "X" in section below: Sketch map: Well House SEPTIC TANK  
DRAINAGE

4 Well depth: 60 ft. Date of completion 12-15-75  
Well diameter 8 in.

5  Cible tool  Rotary  Driven  Dug  
 Hollow rod  Jetted  Bored  Reverse rotary

6 Use:  Domestic  Public supply  Industry  
 Irrigation  Air conditioning  Commercial  
 Test well

7 Casing: Material PVC Height: above below  
Threaded  Welded  Surface 24 in.  
Diam. 5 in. to 60 ft. depth! Drive shoe?  Yes  No  
5 in. to 60 ft. depth!

2	Type and color of material	From	To
	<u>TOP SOIL</u>	<u>0</u>	<u>5</u>
	<u>BROWN CLAY</u>	<u>5</u>	<u>24</u>
	<u>yellow lime</u>	<u>24</u>	<u>28</u>
	<u>Blue shale</u>	<u>28</u>	<u>60</u>

8 Screen: Manufacturer PUMPCO  
Type PVC Dia. 5  
16 gauge .090 Length 20  
Set between 20 ft. and 40 ft.  
Fittings:  
Gravel pack  Yes  No Size range of material 1/4 x 1/8

9 Static water level: 20 ft. below land surface Date 12-15-75

10 Pumping level below land surfaces: AIR TEST  
\_\_\_\_ ft. after \_\_\_\_ hrs. pumping \_\_\_\_ g.p.m.  
\_\_\_\_ ft. after \_\_\_\_ hrs. pumping \_\_\_\_ g.p.m.  
Estimated maximum yield 1 g.p.m.

11 Water sample submitted:  
 Yes  No Date \_\_\_\_\_

12 Well head completion: CAPPED  
 Pitless adapter 24 inches above grade

13 Well grouted?  Yes  No  
 Neat cement  Bentonite  \_\_\_\_\_  
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:  
ft. 100 Direction E Type SEPTIC  
Well disinfected upon completion?  Yes  No

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

16 Remarks: elevation 1120 Owner to install slab  
Topography:  
 Hill  
 Slope  
 Upland  
 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.  
STRADER OIL & CO. INC 182  
Business name License No.  
Address RT 11 Holton, KS  
Signed Dale Bohman Date 12-16-75  
Authorized representative

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5

BR = 1096

∇ = 1100