

54

Maple Hill

CAA

change elev.

prob ok

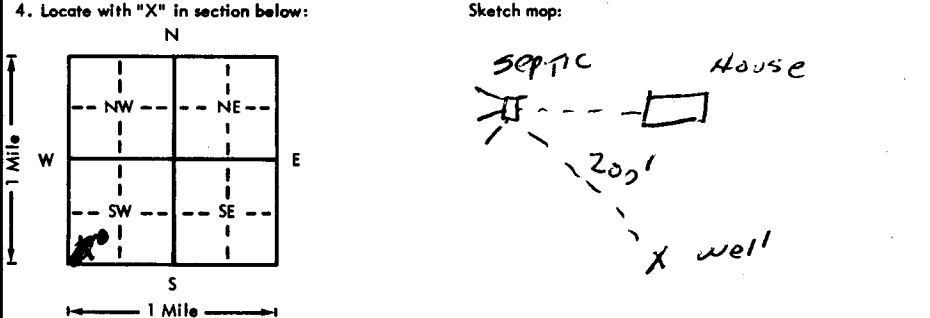
Jed R

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

NE-SW $\frac{1}{4}$ -SW $\frac{1}{4}$

1. Location of well: County <u>WABAUNSEE</u> Fraction <u>SW<math>\frac{1}{4}</math> SW<math>\frac{1}{4}</math> SW<math>\frac{1}{4}</math></u> Section number <u>16</u> Township number T <u>11</u> S R <u>12</u> E/W	
2. Distance and direction from nearest town or city: <u>2 W <math>\frac{1}{2}</math> N</u> Street address of well location if in city: <u>MAPLE HILL</u>	
3. Owner of well: <u>RON BARBER</u> R.R. or street: City, state, zip code: <u>MAPLE HILL</u>	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
	From To
<u>TOP SOIL</u>	0 3
<u>Limestone - shaley</u>	3 40
<u>Shale (grey - blk)</u>	40 150
<u>SANDSTONE (grey)</u>	150 155
<u>Shale grey</u>	155 180
6. Bore hole dia. <u>8</u> in. Completion date <u>11-15-76</u> Well depth <u>180</u> ft.	
7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dig <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
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	
9. Casing: Material <u>PVC</u> Height: <u>above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>29</u> in. RMP <u>PVC 9L</u> Weight <u>3.58</u> lbs./ft. Dia. <u>5</u> in. to <u>180</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>180</u> ft. depth page No. <u>279</u>	
10. Screen: Manufacturer's name <u>Pumpco</u> Type <u>PVC</u> Dia. <u>5</u> <u>50</u> gauge <u>060</u> Length <u>20</u> Set between <u>150</u> ft. and <u>170</u> ft. ft. and <u>170</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 x 1/8</u>	
11. Static water level: <u>150</u> ft. below land surface Date <u>11-15-76</u> mo./day/yr.	
12. Pumping level below land surfaces: ft. after <u>    </u> hrs. pumping <u>    </u> g.p.m. ft. after <u>    </u> hrs. pumping <u>    </u> g.p.m. Estimated maximum yield <u>3</u> g.p.m.	
13. Water sample submitted: <u>    </u> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date <u>    </u>	
14. Well head completion: <u>CAP</u> <input type="checkbox"/> Pitless adapter <u>28</u> 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 <u>5</u> ft. to <u>15</u> ft.	
16. Nearest source of possible contamination: ft. <u>200</u> Direction <u>NW</u> Type <u>SEPTIC</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u>    </u> Model number <u>    </u> HP <u>    </u> Volts <u>    </u> Length of drop pipe <u>    </u> ft. capacity <u>    </u> 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: <u>10.15'</u> Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>OWNER WILL INSTAB SLAB</u>
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. <u>Stader Dalg Co Inc 182</u> Business name License No. Address <u>RT 1 Holton, KS</u> Signed <u>Dale Ashton</u> Date <u>11/15/76</u> Authorized representative	

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

Form WWC-5