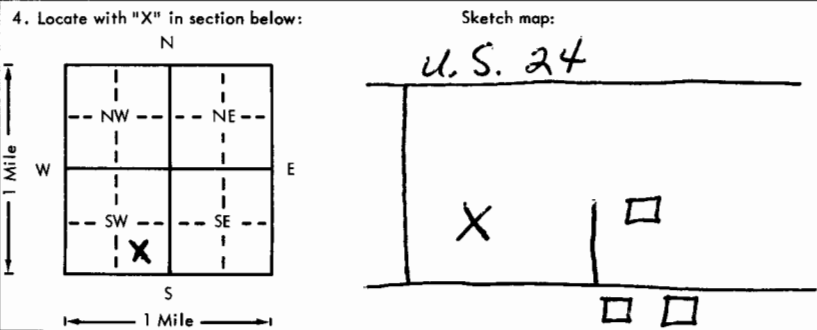


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

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

N 1/4 SW 1/4 SW 1/4 CCA

1. Location of well:		County <b>Shawnee</b>	Fraction <b>Ctr. 4 SW 1/4 SW 1/4</b>	Section number <b>13</b>	Township number <b>T 11 (S)</b>	Range number <b>R 14 (E/W)</b>
2. Distance and direction from nearest town or city: <b>3 mi. East of Silver Lake, Ks. &amp; 3/4 mi. South.</b> Street address of well location if in city:				3. Owner of well: <b>Robert Mohler</b> R.R. or street: <b>R. R. #1</b> City, state, zip code: <b>Silver Lake, Ks. 66539</b>		
4. Locate with "X" in section below: 				6. Bore hole dia. <b>30"</b> in. Completion date <b>3-9-77</b> Well depth <b>53</b> ft.		
5. Type and color of material				From	To	7. <input type="checkbox"/> Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary
<b>Sandy / Top soil</b>				<b>0</b>	<b>1</b>	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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
<b>Hard porous soil</b>				<b>1</b>	<b>2</b>	9. Casing: Material <b>Transite</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <b>16</b> in. to <b>27</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>7/8</b>
<b>Brown sandy soil</b>				<b>2</b>	<b>6</b>	10. Screen: Manufacturer's name <b>Johnson Well Co.</b> Type <b>Transite</b> Dia. <b>16"</b> (Slo) gauze <b>1/8x8</b> Length <b>26'</b> Set between <b>53</b> ft. and <b>27</b> ft. _____ ft. and _____ ft. Gravel pack? <b>yes</b> Size range of material <b>5/8</b>
<b>Hard brown sandy clay</b>				<b>6</b>	<b>36</b>	11. Static water level: _____ mo./day/yr. <b>21</b> ft. below land surface Date <b>12-1-76</b>
<b>Fine to med. green gravel</b>				<b>36</b>	<b>53</b>	12. Pumping level below land surfaces: <b>30</b> ft. after <b>1</b> hrs. pumping <b>600</b> g.p.m. <b>40</b> ft. after <b>3</b> hrs. pumping <b>750</b> g.p.m. Estimated maximum yield <b>850</b> g.p.m.
<b>Stopped.</b>				<b>53</b>		13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____
						14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade
						15. Well grouted? <b>yes</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.
						16. Nearest source of possible contamination: ft. <b>700'</b> Direction <b>West</b> Type <b>Barnyard</b> Well disinfected upon completion? _____ Yes <input checked="" 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: <b>900'</b> Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		19. Remarks: <b>We do not install pumps.</b>		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. <b>Hoobler Drilling Co.</b> <b>323</b> Business name License No. Address <b>St. Marys, Ks. 66536</b> Signed <b>Don Hoobler</b> Date <b>3-14-77</b> Authorized representative		

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

Form WWC-5

BR < 847

▽ = 879

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