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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

SE ADD

1. Location of well: County Shawnee		Fraction SE 1/4 NE 1/4 NE 1/4		Section number 14		Township number T 11 S R 15		Range number 15 NW			
2. Distance and direction from nearest town or city: .5 W				3. Owner of well: Jim Senecal							
Street address of well location if in city: of Goodyear Plant.				R.R. or street: 2549 N.W. Button Rd.							
				City, state, zip code: Topeka, Ks.							
4. Locate with "X" in section below:				Sketch map:				6. Bore hole dia. 10 in. Completion date 7-23-76 Well depth 45 ft.			
								7. <input type="checkbox"/> 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			
								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 PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. RMP <input type="checkbox"/> PVC 9L Weight 2.58 lbs./ft. Dia. 5 in. to 45 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 2.74			
5. Type and color of material				From		To		10. Screen: Manufacturer's name Pumpco			
TOP SOIL				0		5		Type PVC Dia. 5			
SANDY CLAY (BROWN)				5		30		Slot gauze .020 Length 10			
COURSE SAND-MEDIUM GRAVEL				30		45		Set between 35 ft. and 45 ft. ft. and <input type="checkbox"/> ft.			
								Gravel pack? <input checked="" type="checkbox"/> Size range of materials 20x60			
								11. Static water level: <input type="checkbox"/> mo./day/yr. 25 ft. below land surface Date 7-23-76			
								12. Pumping level below land surfaces: AIR TEST <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 20 g.p.m.			
								13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No Date			
								14. Well head completion: CAP <input type="checkbox"/> 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 5 ft. to 15 ft.			
								16. Nearest source of possible contamination: ft. 100 Direction N 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 <input type="checkbox"/> HP <input type="checkbox"/> Volts Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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: ~894' m		19. Remarks: OWNER WILL 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 DRWG CO INC 157 Business name License No. Address 871 Helton, Ks Signed Dale Ashen Date 7-26-76 Authorized representative							

T 11
R 15E
S 14
1/4 1/4 1/4 1/4
NE NE NE

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

Form WWC-5