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

don't ck

WATER WELL RECORD
KSA 82a-1201-1215

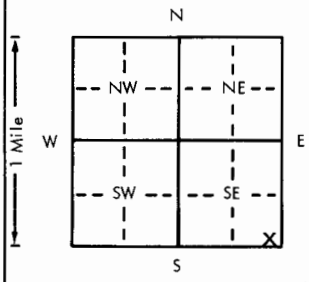
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Jefferson	~~SW~~ SE 1/4 SE 1/4 ~~SE~~ 1/4	16	T 11 S	R 17 (E) W

2. Distance and direction from nearest town or city:
1 Mile North & 2.9 Miles West of Newman,Ks.
Street address of well location if in city:

3. Owner of well: State of Kansas, Department of Transportation
R.R. or street: State Office Building
City, state, zip code: Topeka, Kansas 66612

4. Locate with "X" in section below:



Sketch map:
Rt. Sta. 204+15
West Bound Lanes
Well (40' Rt. of Centerline)
East Bound Lanes o
New construction - U.S. 24 Highway

5. Type and color of material	From	To
Approximately 20' in depth.		
Sand approximately 17' deep.		
Capped with 3' of concrete.		
Cap elevation = 876.35.		
(Use a second sheet if needed)		

6. Bore hole dia. ____ in. Completion date ____
Well depth ____ ft.

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 ____ Height: Above or below
Threaded ____ Welded ____ Surface ____ in.
RMP ____ PVC ____ Weight ____ lbs./ft.
Dia. ____ in. to ____ ft. depth Wall Thickness: inches or
Dia. ____ in. to ____ ft. depth gage No. ____

10. Screen: Manufacturer's name ____
Type ____ Dia. ____
Slot/gauze ____ Length ____
Set between ____ ft. and ____ ft.
____ ft. and ____ ft.
Gravel pack? ____ Size range of material ____

11. Static water level: mo./day/yr.
____ ft. below land surface Date ____

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

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

14. Well head completion:
____ Pitless adapter ____ Inches above grade

15. Well grouted? ____
With: ____ Neat cement ____ Bentonite ____ Concrete
Depth: From ____ ft. to ____ ft.

16. Nearest source of possible contamination:
ft. ____ Direction ____ Type ____
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

T 11 R 17 (E) W Sec 16 1/4 SE 1/4 SE 1/4 SE 1/4

18. Elevation:
Topography:
____ Hill
____ Slope
____ Upland
____ Valley

19. Remarks:
This well was filled on July 12, 1978.

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.
N. R. Hamm Contractor, Inc.
Business name License No. 73
Address Box 17 - Perry, Kansas 66073
Signed Ron Nadvornik Date 7-19-78
Authorized representative
Ron Nadvornik, P.E., Project Mgr.

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

Form WWC-5

not in computer file

MI-1023