

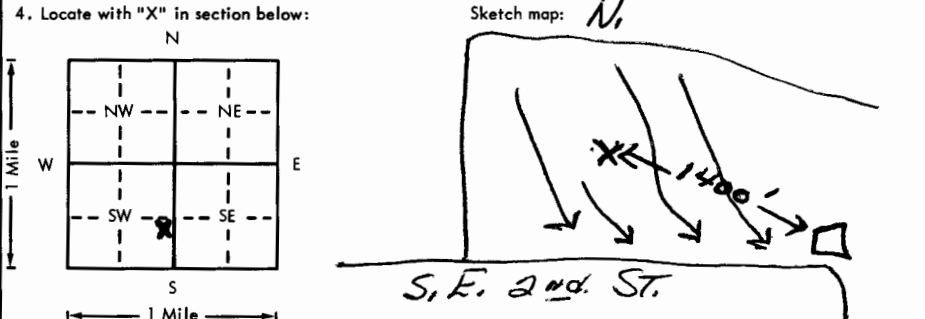
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USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

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

CDA

1. Location of well:		County <b>Shawnee</b>	Fraction <b>NE 1/4 SE 1/4 SW 1/4</b>	Section number <b>27</b>	Township number <b>T 11S</b>	Range number <b>S R 17E</b>	E/W
2. Distance and direction from nearest town or city: <b>3 mi. East of Tecumseh, Ks. on S.E. 2nd St., 1/2 mi. North &amp; Street address of well location if in city: 1/2 mi. East.</b>				3. Owner of well: <b>Meier Bros.</b> R.R. or street: <b>801 Vail Ave.</b> City, state, zip code: <b>Topeka, Ks. 66608</b>			
4. Locate with "X" in section below: 				6. Bore hole dia. <b>30</b> in. Completion date <b>12-30-77</b> Well depth <b>74</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	
Fine brown silty sand				0	19	8. Use: 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	
Med. brown sand & small brown gravel				19	24	9. Casing: Material <b>Trans.</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 <input type="checkbox"/> lbs./ft. Dia <b>16</b> in. to <b>35</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>75"</b>	
Med. to large brown gravel				24	29	10. Screen: Manufacturer's name <b>Johnson Well Casing Co.</b> Type <b>Transite</b> Dia. <b>16"</b> Slot/gauze <b>1/8 x 8</b> Length <b>39'</b> Set between <b>35</b> ft. and <b>74</b> ft. Gravel pack? <b>yes</b> Size range of material <b>1/8-1/4"</b>	
Med. gray gravel				29	32	11. Static water level: <input type="checkbox"/> mo./day/yr. <b>9</b> ft. below land surface Date <b>12-31-77</b>	
Med. to large gray gravel				32	74	12. Pumping level below land surfaces: <b>16</b> ft. after <b>1</b> hrs. pumping <b>1000</b> g.p.m. <b>22</b> ft. after <b>3</b> hrs. pumping <b>1500</b> g.p.m. Estimated maximum yield <b>2000</b> g.p.m.	
Stopped.				74		13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input checked="" type="checkbox"/> No Date	
						14. Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> 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>1400</b> Direction <b>SE</b> Type <b>laterals</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
						17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> 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: <b>860</b> LS		19. Remarks:		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>1-17-78</b> Authorized representative			

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

Form WWC-5