

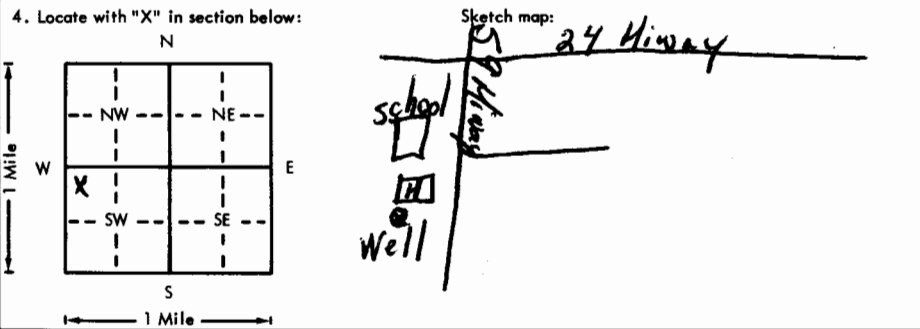
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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WATER WELL RECORD
KSA 82a-1201-1215

CLB

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

1. Location of well: County <u>Jefferson</u> Fraction <u>NE</u> <u>NW 1/4 NW 1/4 SW 1/4</u> Section number <u>29</u> Township number <u>T 11 S</u> Range number <u>R 19E</u>	
2. Distance and direction from nearest town or city: <u>Well located in Williamstown.</u> 3. Owner of well: <u>Perry Atwell</u> R.R. or street: <u>RR 1 Perry Ks. 66073</u> City, state, zip code:	
4. Locate with "X" in section below: 	
5. Type and color of material	
6. Bore hole dia. <u>6 1/2</u> in. Completion date <u>1-10-77</u> Well depth <u>59</u> ft.	
7. <input checked="" 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 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>PITS</u> Height: <u>Above</u> or below Threading: <u>Welded</u> Surface <u>24</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>200</u> lbs./ft. Dia. <u>5</u> in. to <u>59</u> ft. depth Wall Thickness: inches or Dia. <u>200</u> in. to <u>59</u> ft. depth gage No. <u>200</u>	
10. Screen: Manufacturer's name <u>SunFlower</u> Type <u>RMP</u> Dia. <u>5" MHC</u> Slot/gauze <u>1/16</u> Length <u>6" MHC</u> Set between <u>53</u> ft. and <u>59</u> ft. Gravel pack? <u>NO</u> Size range of material _____	
11. Static water level: <u>31</u> ft. below land surface Date <u>1-10-77</u> mo./day/yr.	
12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>24+</u> g.p.m.	
13. Water sample submitted: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____ mo./day/yr.	
14. Well head completion: _____ Pitless adapter <u>24</u> inches above grade	
15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>20</u> ft.	
16. Nearest source of possible contamination: ft. <u>50+</u> Direction <u>N.W.</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 _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: _____ Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other _____	
18. Elevation: <u>950</u> ft. Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley	
19. Remarks: <u>owner to install 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. Business name <u>Robison Drilling</u> License No. <u>216</u> Address <u>Perry Ks.</u> Signed <u>Jack Robison</u> Date <u>1-12-77</u> Authorized representative	

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

Form WWC-5

BR = 79X4
V = 81A22

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R
W
S
SW
NP