

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

1. Location of well:		County <u>Wyandotte</u>	Fraction <u>NE</u> 1/4 1/4 1/4	Section number <u>22</u>	Township number <u>T 11</u>	Range number <u>R 24</u> S E/W
2. Distance and direction from nearest town or city:			3. Owner of well: <u>Jim Stofos FARMS INC</u>			
Street address of well location if in city: <u>6235 KS Ave K.C.K.</u>			R.R. or street: <u>6235 KANSAS AVENUE</u>			
			City, state, zip code: <u>PO BOX 153 ITC, K.</u>			
4. Locate with "X" in section below:			Sketch map:			
5. Type and color of material			From	To	6. Bore hole dia. <u>8 1/2</u> in. Completion date <u>6-28-76</u> Well depth <u>69</u> ft.	
Top soil			0	4	7. <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input checked="" 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	
Clay sandy			4	15	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" 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	
Sand fine dirty			15	35	9. Casing: Material <u>Steel</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>23</u> lbs./ft.	
Sand Fine to medium dirty			35	45	Dia. <u>8</u> in. to <u>59</u> ft. depth Wall Thickness: inches or Dia. <u>8</u> in. to <u>59</u> ft. depth gage No. <u>375</u>	
Sand medium to coarse dirty			45	50	10. Screen: Manufacturer's name <u>Johnson</u>	
Sand Med to Coarse cleaner but dirty			50	59	Type <u>Stainless</u> Dia. <u>8</u> Slot/gauze <u>.080</u> Length <u>10'</u> Set between <u>59</u> ft. and <u>69</u> ft. Gravel pack? <u>no</u> Size range of material _____	
Sand Med to Coarse still dirty			59	69	11. Static water level: _____ mo./day/yr. <u>34</u> ft. below land surface Date <u>6-28-76</u>	
OWNER TO RUN					12. Pumping level below land surfaces: <u>44</u> ft. after <u>2</u> hrs. pumping <u>200</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.	
4'x4'x4' SLAB					13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____	
PERMANENT PUMP RUN IN					14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> inches above grade	
AUGUST.					15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>20</u> ft.	
					16. Nearest source of possible contamination: <u>underground</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: _____ Not installed Manufacturer's name <u>JAC4221</u> Model number <u>75615</u> HP <u>7.5</u> Volts <u>240</u> Length of drop pipe <u>53</u> ft. capacity <u>200</u> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
18. Elevation:			20. Water well contractor's certification:			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley			This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Robison Drilling</u> 316A Business name License No. Address <u>Perry KS</u> Signed <u>Jack Robison</u> Date <u>7/3/76</u>			
19. Remarks:						

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

Form WWC-5