

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

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County Geary	Township name Smoky Hill	Fraction NW⁴ NW⁴ NE⁴	Section number 32	Town number T11S	Range number 5E																									
Distance and direction from nearest town or city: 4 Mi. North				3 Owner of well: Herbert H. King																											
Street address of well location if in city: West of Junction City				Address: 1412 Backwell Dr. Junction City																											
Locate with "X" in section below:		Sketch map:		4 Well depth: 78 ft. Date of completion 7-8-75 Well diameter 7 in.																											
		AB3		5 <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																											
				6 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"/> Commercial <input type="checkbox"/> Test well																											
2				Type and color of material		From To																									
				<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:50%;">Black Soil</td><td style="width:10%;">0</td><td style="width:10%;">1</td><td style="width:30%;"></td></tr> <tr><td>lime Stone</td><td>1</td><td>42</td><td></td></tr> <tr><td>Gray Rock</td><td>42</td><td>55</td><td></td></tr> <tr><td>Some Water</td><td>53</td><td>56</td><td></td></tr> <tr><td>Blue Shale</td><td>56</td><td>70</td><td></td></tr> <tr><td>Gray Rock + Water</td><td>70</td><td>75</td><td></td></tr> <tr><td>Gray Rock</td><td>75</td><td>78</td><td></td></tr> </table>		Black Soil	0	1		lime Stone	1	42		Gray Rock	42	55		Some Water	53	56		Blue Shale	56	70		Gray Rock + Water	70	75		Gray Rock	75
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Blue Shale	56	70																													
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Gray Rock	75	78																													
(use a second sheet if needed)				9 Static water level: 60 ft. below land surface Date 7-8-75		10 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.																									
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____		12 Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade																									
16 Remarks: elevation				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From 0 ft. to 10 ft.		14 Nearest source of possible contamination: ft. 4 MI Direction South Type Tank Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																									
				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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		17 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. Backhoe Drilling 180 Business name _____ License No. _____ Address 1911 N. 1st St. Topeka, Mo. Signed Charles Backhoe Date 7-20-75 Authorized representative																									

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5