

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

Jearry

1. Location of well: County *Butler* Fraction *NE 1/4* Section number *33* Township number *11 S* Range number *5 E*

2. Distance and direction from nearest town or city *West of Junction City West of 77 Highway 1/4 mi* 3. Owner of well: *Robert Meyer*
R.R. or street: *Junction City Kans*
City, state, zip code:

4. Locate with "X" in section below: Sketch map: *X*

5. Type and color of material

	From	To
<i>top soil</i>	<i>0</i>	<i>2</i>
<i>clay, Brown</i>	<i>2</i>	<i>16</i>
<i>clay, Red</i>	<i>16</i>	<i>29</i>
<i>clay, yellow</i>	<i>29</i>	<i>51</i>
<i>Rock, yellow lime</i>	<i>51</i>	<i>70</i>
<i>Shale Blue</i>	<i>70</i>	

6. Bore hole dia. *70* in. Completion date *9-2-76*
Well depth *70* 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 *pvc* Height *Above* or below
Threaded Welded Surface *1 1/2* in.
RMP PVC Weight _____ lbs./ft.
Dia. *5* in. to *70* ft. depth Wall thickness: inches or
Dia. _____ in. to _____ ft. depth gage No. *sch 40*

10. Screens: Manufacturer's name *Pumpec*
Type *pvc* Dia. *5 1/2*
Slot/gauze *.040* Length *40*
Set between *30* ft. and *70* ft.
Gravel pack? Size range of material *1/4" #4*

11. Static water level: _____ mo./day/yr.
70 ft. below land surface Date *8-2-76*

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 *9-2-76*

14. Well head completion: *NA*
 Pitless adapter _____ Inches above grade

15. Well grouted?
With: Neat cement Bentonite Concrete
Depth: From *14* ft. to *4* ft.

16. Nearest source of possible contamination: _____ ft. _____ Direction *West* Type *Septic tank*
Well disinfected upon completion? Yes No

17. Pump: Not installed
Manufacturer's name _____ HP _____ Volts _____
Length of drop pipe _____ ft. capacity _____ g.p.m.
Type:
 Submersible Turbine
 Jet Reciprocating
 Centrifugal Other

18. Elevation: _____

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.
Strader Drilling Co 23
Business name _____ License No. _____
Address *Blue Rapids*
Signed *Harold Strader* Date *9-2*
Authorized representative

(Use a second sheet if needed)

Topography:
 Hill
 Slope
 Upland
 Valley

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

Form WWC-5