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change elev.
1993 to 1093USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.WATER WELL RECORD
KSA 82a-1201-1215Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well: County Wabasha Fraction SE NE NW 1/4 1/4 1/4 Section number 22 Township number T 12 S Range number R 10 E E/W

2. Distance and direction from nearest town or city: 1 mile South 3. Owner of well: David Stueve
Street address of well location if in city: of Alma R.R. or street: RR City, state, zip code: Alma KS

4. Locate with "X" in section below: Sketch map: 6. Bore hole dia. 10 in. Completion date 9-22-78
Well depth 85 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: 18 in. Above or below
Threaded ☐ Welded ☐ Surface ☐ RMP ☐ PVC ☒ Weight ☐ lbs.
Dia. 3 in. to 85 ft. depth Wall Thickness: 1/2 in. Dia. 3 in. to 85 ft. depth gage No. 11. P.T.

10. Screen: Manufacturer's name M. P.T.
Type P.V.C. Dia. 5"
Slot/gage 0.40 Length 40'
Set between 45 ft. and 85 ft.
Gravel pack? ☒ Size range of material 9-22-78

11. Static water level: 45 ft. below land surface Date 9-22-78

12. Pumping level below land surfaces:
____ ft. after ____ hrs. pumping ____ g.p.m.
____ ft. after ____ hrs. pumping ____ g.p.m.
Estimated maximum yield 6 g.p.m.

13. Water sample submitted: ____ mo./day/yr.
____ Yes ☒ No Date ____

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

15. Well grouted? ☒ 1-2
With: ____ Neat cement ____ Bentonite ☒ Concrete
Depth: From 15 ft. to 3 ft.

16. Nearest source of possible contamination:
ft. 1200 Direction EAST Type Creek
Well disinfected upon completion? ☒ Yes ____ No

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

18. Elevation: 1093 Topography: pm
____ Hill
____ Slope
____ Upland
☒ Valley

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.
Harold Stader Business name Blue Rapids License No. 237
Address Harold Stader Signed Harold Stader Date 9-22-78
Authorized representative

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

Form WWC-5

BR = 1185

D = 1148