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

change elev.

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

WATER WELL RECORD
KSA 820-1201-1215

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

SENE NE AAD

1 Location of well:		County <i>Wabasha</i>	Township name <i>Mission Creek</i>	Fracton <i>4 NE 1/4 NE 1/4</i>	Section number <i>31</i>	Town number <i>T12S</i>	Range number <i>R12E</i>
Distance and direction from nearest town or city:				3 Owner of well: <i>Eastman, James</i>			
Street address of well location if in city:				Address: <i>E.G. Eskridge</i>			
Locate with "X" in section below:			Sketch map:			4 Well depth: <i>105</i> ft. Date of completion: <i>8/30/75</i>	
						Well diameter _____ in.	
2			Type and color of material			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	
			From To			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 <input type="checkbox"/>	
top soil			0 3			7 Casing: Material <i>pvc</i> Height: <i>above/below</i>	
yellow clay			3 6			Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <i>36</i> in. Diam. <i>5"</i> Weight <i>200</i> lbs./ft.	
yellow clay, lime rock			6 46			_____ in. to _____ ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth	
white shale with lime rock			46 57			8 Screen: Manufacturer <i>Modern</i>	
gray shale with lime rock			57 76			Type <i>pvc</i> Dia. <i>5</i>	
blue shale			76 80			Slot gauze <i>3/16</i> Length <i>30</i>	
lime with white shale			80 98			Set between <i>75</i> ft. and <i>10</i> ft. <i>30</i>	
yellow and lime gravel			98 105			Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <i>1/2</i>	
white shale			105			9 Static water level: <i>54</i> ft. below land surface Date <i>8/30/75</i>	
						10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <i>5</i> 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	
						13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From <i>3</i> ft. to <i>13</i> ft.	
						14 Nearest source of possible contamination: <i>none</i> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
						15 Pump: <input checked="" 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	
16 Remarks: elevation <i>1265</i> slab installed by customer						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. <i>Cummins Drilling Co 148</i> Business name License No. Address <i>1216 Jasper St</i> Signed <i>[Signature]</i> date <i>9/12/75</i> Authorized representative	

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

Form WWC-5

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