

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

Call

| 1. Location of well: | County Shawnee | Fraction SE 1/4 NW 1/4 SE 1/4 | Section number 12 | Township number T 12 S | Range number R 14 E/W | | | | | | | | | | | | | | | | | | | | |
|--|--------------------------|---|--|----------------------------------|---------------------------------|-----|------------|-----|------------------------|------|--------------------------|-------|-------------------|-------|------------|-------|--------------|-------|------------|-------|------------|-------|---|--|--|
| <input checked="" type="checkbox"/> Distance and direction from nearest town or city: Street address of well location if in city: | | | 3. Owner of well: Gale Bennett R.R. or street: 1150 Woodward North East 53 City, state, zip code: Topeka, Kansas | | | | | | | | | | | | | | | | | | | | | | |
| 4. Locate with "X" in section below: Sketch map: | | | 6. Bore hole dia. 10 in. Completion date 6/15/76 Well depth 65 ft. | | | | | | | | | | | | | | | | | | | | | | |
| 5. Type and color of material <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;">From</th> <th style="width:20%;">To</th> </tr> </thead> <tbody> <tr><td>Top Soil</td><td>0 3</td></tr> <tr><td>Brown Clay</td><td>3 5</td></tr> <tr><td>Yellow Clay, Fine Sand</td><td>5 15</td></tr> <tr><td>Yellow Clay, Course Sand</td><td>15 18</td></tr> <tr><td>Rock, Yellow Lime</td><td>18 22</td></tr> <tr><td>Gray Shale</td><td>22 30</td></tr> <tr><td>White Lime v</td><td>30 36</td></tr> <tr><td>Gray Shale</td><td>36 60</td></tr> <tr><td>Blue Shale</td><td>60 65</td></tr> </tbody> </table> | | | From | To | Top Soil | 0 3 | Brown Clay | 3 5 | Yellow Clay, Fine Sand | 5 15 | Yellow Clay, Course Sand | 15 18 | Rock, Yellow Lime | 18 22 | Gray Shale | 22 30 | White Lime v | 30 36 | Gray Shale | 36 60 | Blue Shale | 60 65 | 7. <input checked="" type="checkbox"/> Cable tool <input checked="" 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 | | | | | | | | | | | | | | | | | | | | | |
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| Blue Shale | 60 65 | | | | | | | | | | | | | | | | | | | | | | | | |
| 8. Use: <input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Public supply <input 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 | | | 9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 48 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 160 lbs./ft. Dia. X in. to X ft. depth X in. thickness: inches or Dia. X in. to X ft. depth X No. | | | | | | | | | | | | | | | | | | | | | | |
| 11. Static water level: 2 ft. below land surface Date 6/15/76 mg./day/yr. | | | 12. Pumping level below land surfaces: ___ ft. after ___ hrs. pumping ___ g.p.m. ___ ft. after ___ hrs. pumping ___ g.p.m. Estimated maximum yield 1 1/3 g.p.m. | | | | | | | | | | | | | | | | | | | | | | |
| 13. Water sample submitted: ___ Yes <input checked="" type="checkbox"/> No Date ___ | | | 14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 3 inches above grade | | | | | | | | | | | | | | | | | | | | | | |
| 15. Well grouted? yes With: ___ Neat cement <input checked="" type="checkbox"/> Bentonite ___ Concrete Depth: From 2 ft. to 12 ft. | | | 16. Nearest source of possible contamination: ft. 80 Direction North Type pond Well disinfected upon completion? <input checked="" type="checkbox"/> Yes ___ No | | | | | | | | | | | | | | | | | | | | | | |
| 17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ___ Model number ___ HP ___ Volts ___ Length of drop pipe ___ ft. capacity ___ g.p.m. 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 | | | 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. <i>Carminna Drilling</i> License No. 148 Business name Address 1310 Topeka, KS Signature <i>Janette Carminna</i> Date 6/15/76 Authorized representative | | | | | | | | | | | | | | | | | | | | | | |
| 18. Elevation: | | | 19. Remarks: Slab will be installed by customer | | | | | | | | | | | | | | | | | | | | | | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley | | | | | | | | | | | | | | | | | | | | | | | | | |

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

Form WWC-5