

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

WATER WELL RECORD
KSA 82a-1201-1215

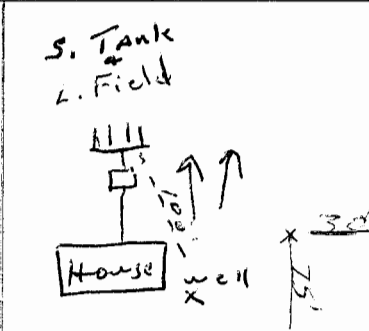
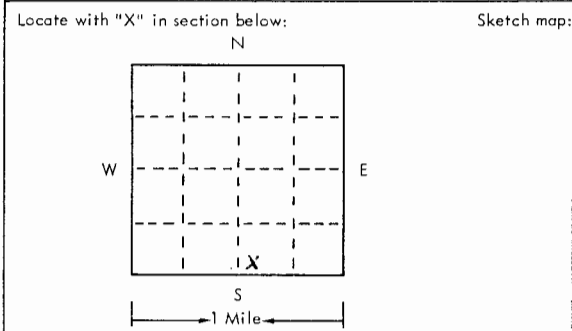
T R EW sec 1/4 1/4 1/4 No.

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

SE 1/4 SE 1/4

1 Location of well: County Shawnee Township name Manmawth Fraction SW 1/4 Section number 34 Town number 12 Range number 16

Distance and direction from nearest town or city: 1 1/4 mi BERRYTON, KS 3 Owner of well: John Jackson
Street address of well location if in city: 3220 S.E. 61st Address: 3300 S.E. 61st Topeka, Kansas



4 Well depth: 80 ft. Date of completion 8-6-75
Well diameter 8 in.

5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored Reverse rotary

6 Use: Domestic Public supply Industry
 Irrigation Air conditioning Commercial
 Test well

7 Casing: Material PVC Height: above/below
Threaded Welded Surface 24 in.
Diam. Weight 2.33 lbs./ft.
0 in. to 80 ft. depth Drive shoe? Yes No
___ in. to ___ ft. depth

2	Type and color of material	From	To
	Top Soil	0	3
	Yellow Clay	3	6
	Red Clay	6	8
	Grey Sandstone	8	35
	Brown Limestone	35	36
	Grey Limestone	36	44
	Blue Shale	44	45
	Grey Limestone	45	50
	Blue Shale	50	55
	Grey Sandstone	55	65
	Blue Shale	65	76
	Sandy Blue Shale	76	80
	(use a second sheet if needed)		

8 Screen:
Manufacturer Pumpco
Type PVC Dia. 5
Slot/g Length 20
Set between 24 ft. and 44 ft.
Fittings:
Gravel pack Yes No Size range of material 1/4" x 1/8"

9 Static water level: NOT MEASURED
23 ft. below land surface Date 8-6-75 MNC

10 Pumping level below land surfaces: AIR TEST
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 8 g.p.m.

11 Water sample submitted:
 Yes No Date ___

12 Well head completion: Capped
 Pitless adapter 24 Inches above grade

13 Well grouted? Yes No
 Neat cement Bentonite ___
Depth: From 0 ft. to 12 ft.

14 Nearest source of possible contamination:
ft. 100 Direction N Type S. Tank
Well disinfected upon completion? Yes No

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

16 Remarks: elevation 1072 well slab by owner.
Topography:
 Hill
 Slope
 Upland
 Valley

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.
Stander Drilling Co Inc 182
Business name License No. _____
Address RFD 1 Holton Kansas
Signed Dale Johnson Date 8-14-75
Authorized representative

12 16E 34 SW 34 SE