PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

95.21648 38.97702 167

1 Location of well: County	Township name	Fraction	Section number	Town number	Range number
DOUGLAS		C NE¼ SW¼	29	12	20 E

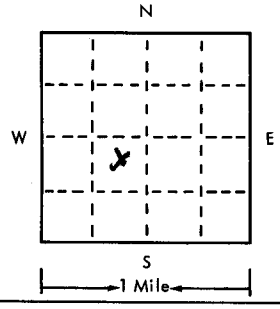
Distance and direction from nearest town or city:

Street address of well location if in city:

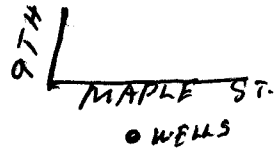
3 Owner of well: FMC

Address: 9TH MAPLE LAWRENCE KS.

Locate with "X" in section below:



Sketch map:



4 Well depth: 45 ft. Date of completion 2-19-76
Well diameter 4 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 STEEL Height: above/below
Threaded ☐ Welded ☒ Surface 12" in.
Diam. Weight .25 lbs./ft.
____ in. to ____ ft. depth Drive shoe? ☐ Yes ☒ No
____ in. to 42 ft. depth

2

Type and color of material	From	To
SOIL	0	6
SILTY SAND	6	12
BROWN MEDIUM SAND	12	13
SILTY SAND BROWN	13	25
FINE SILTY SAND	25	35
CLAY BLUE	35	45
MEDIUM SAND BLUE	45	49
BED ROCK	49	

(use a second sheet if needed)

8 Screen:
Manufacturer HOP JOHNSON
Type L.R. STEEL Dia. 4"
Slot/gauze 30 Length 3
Set between 42 ft. and 45 ft.
Fittings:
Gravel pack ☐ Yes ☒ No Size range of material ____

9 Static water level:
18 ft. below land surface Date 2-19-76

10 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.

11 Water sample submitted:
☐ Yes ☒ No Date ____

12 Well head completion:
☐ Pitless adapter ☒ Inches above grade 12"

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐ _____
Depth: From 0 ft. to 15 ft.

14 Nearest source of possible contamination:
ft. ____ Direction ____ Type ____
Well disinfected upon completion? ☐ Yes ☒ No

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

16 Remarks: elevation

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.
JUNGMAN BROS DRILLING CO 119A
Business name License No.
Address CARBONDALE
Signed [signature] Date 2-19-76
Authorized representative

12 20E 29 CNESW

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

Form WWC-5