

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

1. Location of well:	County <b>DICKINSON</b>	Fraction <b>NE 1/4 NE 1/4 NE 1/4</b>	Section number <b>30</b>	Township number <b>T 12 S</b>	Range number <b>R 9 E</b>
2. Distance and direction from nearest town or city: <b>5 N</b>			3. Owner of well: <b>Don Krubel</b>		
Street address of well location if in city: <b>Chapman</b>			R.R. or street: <b>201 Colorado</b>		
			City, state, zip code: <b>MANHATTAN, KS 66502</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>8</b> in. Completion date <b>6-26-79</b>	
<div style="text-align: center;">N</div>				Well depth <b>120</b> ft.	
				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	
				8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
				9. Casing: Material <b>PVC</b> Height: <b>60</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>29</b> in. RMP <input type="checkbox"/> PVC <b>9L</b> Weight <b>2.62</b> lbs./ft. Dia. <b>5</b> in. to <b>120</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>250</b>	
5. Type and color of material		From	To	10. Screen: Manufacturer's name <b>Pumpco MPI</b>	
<b>Top soil</b>		<b>0</b>	<b>6</b>	Type <b>PVC</b> Dia. <b>5</b>	
<b>Clay brown</b>		<b>6</b>	<b>18</b>	Slot gauze <b>1020</b> Length <b>46</b>	
<b>slate, yellow</b>		<b>18</b>	<b>90</b>	Set between <b>60</b> ft. and <b>100</b> ft.	
<b>Limestone, yellow, WATER BEARING</b>		<b>90</b>	<b>90</b>	Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1030x1060</b>	
<b>slatey Lime grey</b>		<b>90</b>	<b>120</b>	11. Static water level: <b>70</b> ft. below land surface Date <b>6-26-79</b>	
				12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <b>20</b> g.p.m.	
				13. Water sample submitted: ____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <b>6-26-79</b>	
				14. Well head completion: <b>PAP</b> <input type="checkbox"/> Pitless adapter <b>29</b> Inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>5</b> ft. to <b>15</b> ft.	
				16. Nearest source of possible contamination: ft. <b>200</b> Direction <b>SE</b> Type <b>SEPTIC</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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	
		(Use a second sheet if needed)		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. <b>STRAIDER DRILG CO INC 182</b> Business name _____ License No. _____ Address <b>RTI Holton, KS</b> Signed <b>Dale Krubel</b> Date <b>6-26-79</b> Authorized representative	
18. Elevation:	19. Remarks: <b>owner to install slab</b>		20. Water well contractor's certification: (continued)		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 12 S - R 9 E - Sec 30 - NE NE NE

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

Form WWC-5