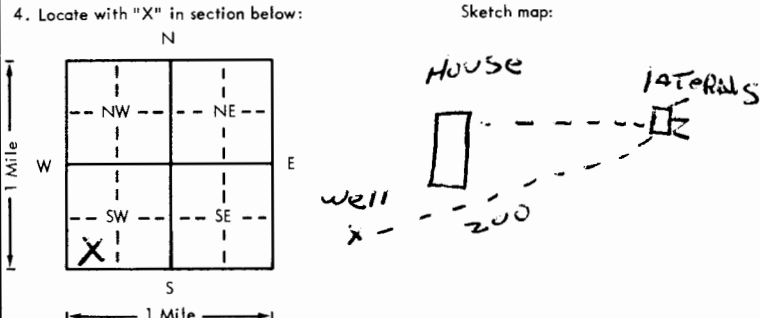


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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: GEARY	Fraction: SW 1/4 SW 1/4	Section number: 1	Township number: T 12 S R 4 E/W	Range number: 4																								
2. Distance and direction from nearest town or city: 7 W OF JUNCTION CITY			3. Owner of well: RICHARD ROTHFUS R.R. or street: 1012 Highland City, state, zip code: JCT. CITY, KS																										
4. Locate with "X" in section below: 			6. Bore hole dia. 8 in. Completion date _____ Well depth 140 ft. 5-12-77																										
5. Type and color of material			7. 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																										
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;"></th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td>Clay, Brown</td> <td>0</td> <td>8</td> </tr> <tr> <td>Limestone, grey, brown</td> <td>8</td> <td>18</td> </tr> <tr> <td>Shale, grey</td> <td>18</td> <td>27</td> </tr> <tr> <td>Limestone, yellow, brown</td> <td>27</td> <td>51</td> </tr> <tr> <td>Shale, yellow, limestone, BR</td> <td>51</td> <td>98</td> </tr> <tr> <td>Limestone, yellow</td> <td>98</td> <td>110</td> </tr> <tr> <td>Limestone, grey, shale, grey</td> <td>110</td> <td>140</td> </tr> </tbody> </table>				From	To	Clay, Brown	0	8	Limestone, grey, brown	8	18	Shale, grey	18	27	Limestone, yellow, brown	27	51	Shale, yellow, limestone, BR	51	98	Limestone, yellow	98	110	Limestone, grey, shale, grey	110	140	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		
				From	To																								
Clay, Brown	0	8																											
Limestone, grey, brown	8	18																											
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Shale, yellow, limestone, BR	51	98																											
Limestone, yellow	98	110																											
Limestone, grey, shale, grey	110	140																											
			9. Casing: Material PVC Height: Above or below Threading: <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. RMP PVC 9L Weight 2.58 lbs./ft. Dia. 5 in. to 140 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. 2.58																										
			10. Screen: Manufacturer's name _____ Pumpco Type PVC Dia. 5 Sig/gauze 060 Length 30 Set between 95 ft. and 115 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 x 1/8																										
			11. Static water level: _____ mo./day/yr. 60 ft. below land surface Date 5-12-77																										
			12. Pumping level below land surfaces: AIR TEST _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 30 g.p.m.																										
			13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____																										
			14. Well head completion: CAP _____ Pitless adapter 24 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 5 ft. to 15 ft.																										
			16. Nearest source of possible contamination: ft. 200 Direction NE Type SEPTIC 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																										
18. Elevation:			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. STRADER DELQ Co Inc 182 Business name License No. _____ Address RT 1 HOLTAN, KS Signed Dale Baker Date 5-15-77 Authorized representative																										
19. Remarks: OWNER TO INSAL SLAB																													

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

Form WWC-5

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