

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

WATER WELL RECORD
KSA 82a-120, 125

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

NE SW NE Junction City Kans

1. Location of well:		County <u>Leary</u>	Fraction <u>121 W 8th St</u> <u>lots 111 to 119</u> <u>1/4 1/4</u>	Section number <u>2</u>	Township number <u>12 South</u>	Range number <u>5 East</u>															
2. Distance and direction from nearest town or city		3. Owner of well:		R.R. or street: <u>829 crestview Dr.</u>																	
Street address of well location if in city: <u>Junction City Kans</u>		City, state, zip code: <u>Junction City Kans 66441</u>																			
4. Locate with "X" in section below:		Sketch map		8. Bore hole dia. <u>12</u> in. Completion date <u>June 9-77</u> Well depth <u>73</u> ft.																	
		<u>121 W 8th St</u> <u>119-111</u>		7. <input checked="" type="checkbox"/> Cable tool <input 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																	
5. Type and color of material		<u>alloy between 6 & 77 ft</u>		9. Casing: Material <u>STEEL</u> Height: Above or below Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. PMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>20</u> lbs./ft. Dia. <u>5 1/2</u> in. to <u>60</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>73</u> ft. depth gage No. <u>200 P.S.</u>																	
<table border="1"> <tr><td>top soil</td><td>0</td><td>6</td></tr> <tr><td>Clay & Loam</td><td>6</td><td>40</td></tr> <tr><td>fine sand</td><td>40</td><td>55</td></tr> <tr><td>gravel & fine sand</td><td>55</td><td>60</td></tr> <tr><td>Shale Blue</td><td>60</td><td>73</td></tr> </table>		top soil	0	6	Clay & Loam	6	40	fine sand	40	55	gravel & fine sand	55	60	Shale Blue	60	73			10. Screens: Manufacturer's name <u>Pump M.P.I.</u> <u>sturdy perfor lower end</u> Type <u>5'</u> Dia. <u>5</u> Slot/gauze <u>1040</u> Length <u>10'</u> Set between <u>60</u> ft. and <u>70</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 X 1/2</u>		
top soil	0	6																			
Clay & Loam	6	40																			
fine sand	40	55																			
gravel & fine sand	55	60																			
Shale Blue	60	73																			
				11. Static water level: <u>40</u> ft. below land surface Date <u>6-9-77</u> mo./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 <u>over 40</u> g.p.m.																	
				13. Water sample submitted: ___ Yes <input checked="" type="checkbox"/> No Date ___ mo./day/yr.																	
				14. Well head completion: <u>NP</u> ___ Pitless adapter ___ Inches above grade																	
				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>10</u> ft. to <u>top</u> ft.																	
				16. Nearest source of possible contamination: <u>30</u> ft. Direction <u>east</u> type <u>Sewer pipe</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes ___ No ___																	
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name ___ HP ___ Volts ___ Model number ___ Length of drop pipe ___ ft. capacity ___ g.p.m. Type: ___ Submersible ___ Turbine ___ Jet ___ Reciprocating ___ Centrifugal ___ Other																	
18. Elevation:		19. Remarks:		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. <u>Strader Drilling Co</u> <u>2371 E</u> Business name <u>Blue Rapids</u> License No. <u>1/4 1/4</u> Address <u>Harold Strader</u> Date <u>6-9-77</u> Signed <u>Harold Strader</u> Authorized representative																	

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

Form WWC-5