

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 <u>GOVARY</u>	Fraction <u>SW 1/4 SW 1/4 SW 1/4</u>	Section number <u>9</u>	Township number <u>T 12S</u>	Range number <u>S R 5 E/W</u>
2. Distance and direction from nearest town or city: <u>1.5 W .5 S</u>			3. Owner of well: <u>RICHARD POTRUS</u>			
Street address of well location if in city: <u>OF JUNCTION CITY</u>			R.R. or street: <u>RR 3</u>			
			City, state, zip code: <u>JUNCTION CITY, Kansas 66203</u>			
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. <u>8</u> in. Completion date _____	
					Well depth <u>175</u> ft. <u>4-7-78</u>	
					7. <input 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 <u>PVC</u> Height: (Above or below) Threaded _____ Welded _____ Surface <u>24</u> in. RMP _____ PVC <u>96</u> Weight <u>250</u> lbs./ft. Dia. <u>5</u> in. to <u>175</u> ft. depth Wall thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>1274</u>	
5. Type and color of material		From	To		10. Screen: Manufacturer's name _____	
<u>TOP SOIL</u>		<u>0</u>	<u>6</u>		<u>PUMCO, MPF</u>	
<u>Clay, BROWN</u>		<u>6</u>	<u>30</u>		Type <u>PVC</u> Dia. <u>5</u>	
<u>Shale, grey</u>		<u>30</u>	<u>65</u>		Slot/gauge <u>020</u> Length <u>40'</u>	
<u>Limestone, shaley, BROWN, yellow</u>		<u>65</u>	<u>115</u>		Set between <u>100</u> ft. and <u>140</u> ft.	
<u>Limestone, yellow</u>		<u>115</u>	<u>125</u>		Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>0.30x0.60</u>	
<u>Shale, grey, Limestone, BROWN</u>		<u>125</u>	<u>142</u>		11. Static water level: _____ mo./day/yr.	
<u>Shale, grey, Red, BK,</u>		<u>142</u>	<u>175</u>		<u>60</u> ft. below land surface Date _____	
					12. 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.	
					13. Water sample submitted: _____ mo./day/yr.	
					Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____	
					14. Well head completion: <u>CAP</u>	
					Pitless adapter <u>24</u> 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 <u>0</u> ft. to <u>10</u> ft.	
					16. Nearest source of possible contamination: ft. <u>200</u> Direction <u>W</u> Type <u>SEPTIC</u>	
					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:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		<u>OWNER TO INSTALL SLAB</u>		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
				<u>STRADER Drilling Co 182</u>		
				Business name _____ License No. _____		
				Address <u>RT 1 Halton, Kans</u>		
				Signed <u>Dale Ashburn</u> Date <u>4-9-78</u>		
				Authorized representative		

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

Form WWC-5