

got yield

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

Smoky Hill Township

1. Location of well:	County <b>BEARY</b>	Fraction <b>SW 1/4 NE 1/4</b>	Section number <b>10</b>	Township number <b>T125</b>	Range number <b>R3E</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:	<b>1/2 mi west of Junction City</b>		3. Owner of well: <b>David S. Walker</b> R.R. or street: <b>934 Mulberry</b> City, state, zip code: <b>Junction City Kans</b>		
4. Locate with "X" in section below:	Sketch map: 		6. Bore hole dia. <b>10 1/2</b> in. Completion date <b>Apr 18-78</b> Well depth <b>203</b> ft. <b>4-18-78</b>		
5. Type and color of material	From	To	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		
<b>top soil</b>	<b>0</b>	<b>4</b>	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		
<b>yellow limestone</b>	<b>4</b>	<b>34</b>	9. Casing: Material <b>RMP</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>16</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>203</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____		
<b>blue shale</b>	<b>34</b>	<b>42</b>	10. Screen: Manufacturer's name <b>Jess &amp; Lowell</b> Type <b>RMP</b> Dia. <b>5</b> Slot/gauze <b>.040</b> Length <b>40 ft</b> Set between <b>163</b> ft. and <b>203</b> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/4 to 1/2</b>		
<b>yellow limestone</b>	<b>42</b>	<b>70</b>	11. Static water level: _____ mo./day/yr. <b>180</b> ft. below land surface Date <b>Apr 18-78</b>		
<b>blue shale</b>	<b>70</b>	<b>101</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>4</b> g.p.m.		
<b>red shale</b>	<b>101</b>	<b>110</b>	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
<b>limestone</b>	<b>110</b>	<b>114</b>	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade		
<b>blue shale</b>	<b>114</b>	<b>155</b>	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>4</b> ft. to <b>15</b> ft.		
<b>blue shale</b>	<b>155</b>	<b>160</b>	16. Nearest source of possible contamination: <b>None</b> ft. <b>1350</b> Direction <b>east</b> Type <b>sewer line</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>red shale</b>	<b>160</b>	<b>190</b>	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		
<b>yellow limestone</b>	<b>190</b>	<b>195</b>	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>Strader Drilling Co 237</b> Business name _____ License No. _____ Address <b>Strader Drilling Co</b> Signed <b>Harold Strader</b> Date <b>Apr 18-78</b> Authorized representative _____ <b>Blue Rapids Kans</b> Form WWC-5		
<b>blue shale</b>	<b>195</b>	<b>203</b>			
(Use a second sheet if needed)					
18. Elevation:	19. Remarks:				
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

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