

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

T	R	EW	sec 1/4 1/4 1/4 No.
---	---	----	---------------------

WATER WELL RECORD
KSA 82a-1201-1215
NE NW NE
ABA

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:		County Wabaunsee	Township name Mission Creek	Fraction TRCT. SW 1/4 SW 1/4	Section number 20	Town number 135	Range number 12 E		
Distance and direction from nearest town or city: 2 E, 7 N			Street address of well location if in city: Eskridge, Ks.		3 Owner of well: Arnold Buntain Griggs Address: RFD 1 Eskridge, Ks.				
Locate with "X" in section below: N W E S 1 Mile		Sketch map: DC 50' 200'			4 Well depth: 100 ft. Date of completion 8-22-75 Well diameter 8 in.				
2 Type and color of material					From	To	5 <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		
					Top Soil			0	2
					Blue Shale			2	33
					Grey Limestone			33	37
					Blue Shale			37	50
					Yellow Limestone			50	55
					Blue Shale			55	76
					Grey Limestone			76	89
					Blue Shale			89	100
				7 Casing: Material PVC Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. Diam. Weight 233 lbs./ft. 5 in. to 100 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No — in. to — ft. depth					
				8 Screen: Manufacturer Pumpco Type PVC Dia. 5" Slot/gauge 1080 Length 10' Set between 45 ft. and 55 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 4x4/8					
				9 Static water level: NOT MEASURED — ft. below land surface Date —					
				10 Pumping level below land surfaces: AIR TEST — ft. after — hrs. pumping — g.p.m. — ft. after — hrs. pumping — g.p.m. Estimated maximum yield 2 g.p.m.					
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date —					
				12 Well head completion: capped <input type="checkbox"/> Pitless adapter 24 <input checked="" type="checkbox"/> inches above grade					
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From 0 ft. to 10 ft.					
				14 Nearest source of possible contamination: ft. 125 Direction N.W. Type S. Tank Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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					
16 Remarks: elevation 1341' Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				17 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. 5 Steader Dalg. Co. Inc 182 Business name License No. Address RFD 1 Holton Ks. Signed Dale Dalmer Date 8-30-75 Authorized representative					

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

BR = 1339

Δ =

130
12 E
SW SE