

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>Shawnee</u> Fraction <u>NW 1/4 NE 1/4 NW 4</u> Section number <u>11</u> Township number <u>T 13 S</u> Range number <u>R 13 E</u> E/W	
2. Distance and direction from nearest town or city: <u>1/2 S of Dover</u> Street address of well location if in city:	
3. Owner of well: <u>Keith Logan</u> R.R. or street: <u>RR #7</u> City, state, zip code: <u>Topeka, KS, 66604</u>	
4. Locate with "X" in section below: Sketch map:	
<div style="display: flex; align-items: center;"> <div style="margin-right: 20px;"> <p>1 Mile</p> <p>1 Mile</p> </div> <div> </div> </div>	
6. Bore hole dia <u>6 7/8</u> in. Completion date <u>9/8/79</u> Well depth <u>120</u> ft.	
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	
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: <u>Above</u> or below Threading: <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>120</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>200</u>	
5. Type and color of material	
	From To
<u>Top Soil</u>	<u>0 2</u>
<u>Brown Sand Stone &amp; Clay</u>	<u>2 42</u>
<u>Shale Grey</u>	<u>42 50</u>
<u>Sand Stone Brown</u>	<u>50 54</u>
<u>Shale sandy Grey</u>	<u>54 68</u>
<u>Lime</u>	<u>68 73</u>
<u>Shale</u>	<u>73 120</u>
10. Screen: Manufacturer's name <u>Cer-Mac</u> Type <u>RMP</u> Dia. <u>5"</u> Slot/gauze <u>3/16</u> Length <u>70</u> Set between <u>50</u> ft. and <u>120</u> ft. _____ ft. and _____ ft. Gravel pack? <u>NO</u> Size range of material _____	
11. Static water level: _____ mo./day/yr. <u>48</u> ft. below land surface Date <u>9/8/79</u>	
12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>3 1/2</u> g.p.m.	
13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
14. Well head completion: <input type="checkbox"/> 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>36</u> ft.	
16. Nearest source of possible contamination: ft. <u>100+</u> Direction <u>South</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	
(Use a second sheet if needed)	
18. Elevation: <u>1151</u> km Topography: <input checked="" type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>owner to install slab</u>
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. Business name <u>Robison Drilling 316</u> License No. _____ Address <u>Perry KS</u> Signed <u>Jack Robison</u> Date <u>9/8/79</u> authorized representative	

T 13 S  
 R 13 E  
 W  
 Sec 11  
 NW 1/4 NE 1/4 NW 1/4

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

Form WWC-5