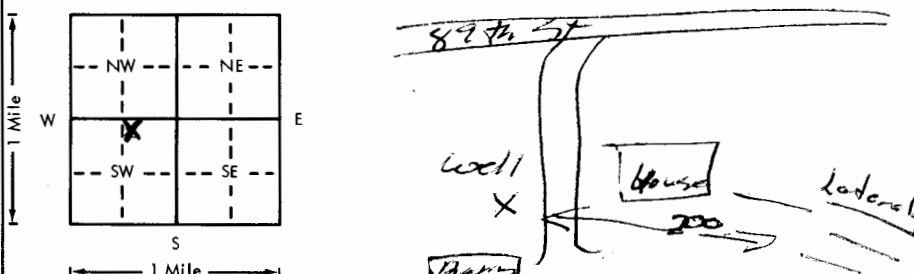


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

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

NE CBA

1. Location of well: County <u>Shawnee</u> Fraction <u>NW 1/4 NE 1/4 S6 1/4</u> Section number <u>23</u> Township number <u>T 13 S</u> Range number <u>R 13 E</u>	
2. Distance and direction from nearest town or city: <u>7 W on 89th St</u> Street address of well location if in city: <u>Auburn</u> 3. Owner of well: <u>Gene Childers</u> R.R. or street: <u>RR #1</u> City, state, zip code: <u>Harveyville, KS</u>	
4. Locate with "X" in section below: Sketch map: 	
6. Bore hole dia. <u>8</u> in. Completion date <u>7-77</u> Well depth <u>80</u> ft.	
7. <input checked="" 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: <u>above</u> or below Threading: <u>Welded</u> Surface <u>24</u> in. RMP: <u>PVC</u> Weight <u>2.74</u> lbs./ft. Dia. <u>5</u> in. to <u>80</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>80</u> ft. depth gage No. <u>285</u>	
10. Screen: Manufacturer's name <u>MPE - 10-100</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze <u>1060</u> Length <u>10'</u> Set between <u>15</u> ft. and <u>25</u> ft. Gravel pack? <u>yes</u> Size range of material <u>4-1/4"</u>	
11. Static water level: <u>12</u> ft. below land surface Date <u>7-77</u> mo./day/yr.	
12. Pumping level below land surfaces: <u>12</u> ft. after <u>1</u> hrs. pumping <u>5</u> g.p.m. Estimated maximum yield: <u>5</u> g.p.m.	
13. Water sample submitted: <u>no.</u> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date	
14. Well head completion: <u>Top of</u> Pitless adapter <u>24</u> inches above grade	
15. Well grouted? <u>yes!</u> 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>E</u> Type <u>laterals</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <u>Not installed</u> 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	
5. Type and color of material	
From	To
<u>0</u>	<u>3</u>
<u>3</u>	<u>6</u>
<u>6</u>	<u>14</u>
<u>14</u>	<u>18</u>
<u>18</u>	<u>19</u>
<u>19</u>	<u>20</u>
<u>20</u>	<u>21</u>
<u>21</u>	<u>32</u>
<u>32</u>	<u>36</u>
<u>36</u>	<u>37</u>
<u>37</u>	<u>45</u>
<u>45</u>	<u>54</u>
<u>54</u>	<u>56</u>
<u>56</u>	<u>80</u>
18. Elevation: <u>1152</u> Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	
19. Remarks: <u>Owner will pour cement slab around well</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>Stander Dalg Co Inc</u> License No. <u>182</u> Address <u>Helton, KS</u> Signed <u>Dale Palmer</u> Date <u>7-77</u> Authorized representative	

258 MHC  
L3  
L30  
23  
NW NE SW  
1/4 1/4 1/4

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

Form WWC-5

BR = 1134

▽ = 1140