

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

168

CCA

1. Location of well: County SHAWNEE Fraction NE SW Section number 33 Township number T 13 S Range number R 15 E E/W

2. Distance and direction from nearest town or city: OSAGE 1/4 SW 1/4 OSAGE Street address of well location if in city: 15.-3W. of Wakarusa

3. Owner of well: DAVE MAPLE R.R. or street: R.R. 1 City, state, zip code: WATTAUGA KS. 66546

4. Locate with "X" in section below: Sketch map:

6. Bore hole dia. 6 in. Completion date 8-12-78
Well depth 38 ft.

7. Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored Reverse rotary

8. Use: Domestic Public supply Industry
 Irrigation Air conditioning Stock
 Lawn Oil field water Other

9. Casing: Material _____ Height: Above or below _____
Threaded _____ Welded _____ Surface + 48" in.
RMP PVC _____ Weight 200 lbs./ft.
Dia. 5 in. to 38 ft. depth; Wall Thickness: inches or _____
Dia. _____ in. to _____ ft. depth; gage No. 200

5. Type and color of material

	From	To
SOIL BLACK	0	2
CLAY	2	23
SANDY CLAY MUDDY WET	23	30
CLAY WITH SOME GRAVEL WATER	30	32
LIME BLUE	32	35
SHALE BLACK	35	38

10. Screen: Manufacturer's name PERFORATED
Type STAINLESS Dia. 5"
Slot/gauze 0.50 Length 8
Set between 30 ft. and 38 ft.
_____ ft. and _____ ft.
Gravel pack? Size range of material 4"

11. Static water level: _____ mo./day/yr.
12 ft. below land surface Date 9-12-78

12. Pumping level below land surfaces:
_____ ft. after _____ hrs. pumping _____ g.p.m.
36 ft. after 2 hrs. pumping 9 g.p.m.
Estimated maximum yield 9 g.p.m.

13. Water sample submitted: _____ mo./day/yr.
Yes No Date _____

14. Well head completion:
 Pitless adapter 48" inches above grade

15. Well grouted?
With: _____ Neat cement Bentonite _____ Concrete _____
Depth: From 15 ft. to 0 ft.

16. Nearest source of possible contamination:
ft. 75 Direction EAST Type RIVER
Well disinfected upon completion? Yes _____ No

17. Pump: _____ Not installed
Manufacturer's name USED ?
Model number UNKNOWN HP 1/2 Volt 230
Length of drop pipe 30' ft. capacity 6 g.p.m.
Type:
 Submersible _____ Turbine
_____ Jet _____ Reciprocating
_____ Centrifugal _____ Other

18. Elevation: 1013 ft.
Topography:
 Hill
 Slope
 Upland
 Valley

19. Remarks:

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.
JANIS MA BARS DRILLING CO 119
Business name _____ License No. _____
Address CARBONDALE KS. 66414
Signed [Signature] Date 9-30-78
Authorized representative

(Use a second sheet if needed)

13 150 33 5050
T R S W Sec 1/4 1/4 1/4

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

Form WWC-5