11

check again - doesn't fit map

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

WATER WELL RECORD
KSA 82a-1201-1215

CCB

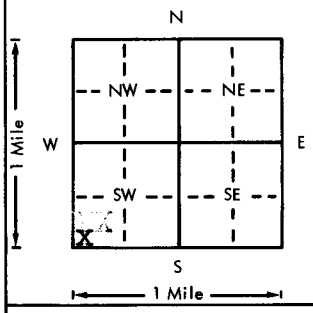
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well: County	Fraction	Section number	Township number	Range number
Johnson	NW 1/4 SW 1/4 SW 1/4	16	T 13S S	R 23E E/W

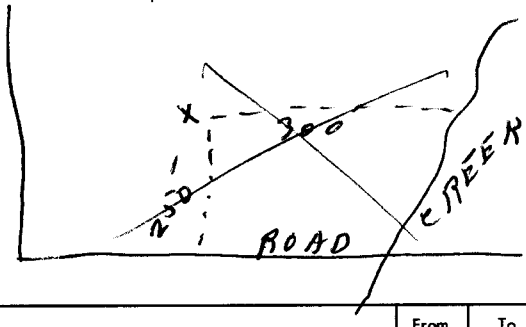
2. Distance and direction from nearest town or city: 2½ mi. NW Olathe
Street address of well location if in city:

3. Owner of well: Thomas Hadd
R.R. or street: 1009 N. Cooper
City, state, zip code: Olathe, Ks. 60061

4. Locate with "X" in section below:



Sketch map:



6. Bore hole dia. 8¼ in. Completion date 9-76
Well depth 50 ft.

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

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

9. Casing: DRY HOLE Height: Above or below
Threaded ___ Welded ___ Surface ___ in.
RMP ___ PVC ___ Weight ___ lbs./ft.
Dia. ___ in. to ___ ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No.

10. Screen: Manufacturer's name DRY HOLE
Type ___ Dia. ___
Slot/gauze ___ Length ___
Set between ___ ft. and ___ ft.
___ ft. and ___ ft.
Gravel pack? ___ Size range of material

11. Static water level: DRY HOLE mo./day/yr.
___ ft. below land surface Date

12. Pumping level below land surfaces:
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield ___ g.p.m.

13. Was pump test made: DRY HOLE mo./day/yr.
___ Yes ___ No Date

14. Well head completion: DRY HOLE
___ Pitless adapter ___ Inches above grade

15. Well grouted? DRY HOLE
With: ___ Neat cement ___ Bentonite ___ Concrete
Depth: From ___ ft. to ___ ft.

16. Nearest source of possible contamination:
ft. DRY HOLE Direction ___ Type ___
Well disinfected upon completion? ___ Yes ___ No

17. Pump: DRY HOLE Not installed
Manufacturer's name
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.p.m.
Type:
___ Submersible ___ Turbine
___ Jet ___ Reciprocating
___ Centrifugal ___ Other

5. Type and color of material	From	To
surface (silt&clay)	0	25
lime (grey)	25	34
shale (black)	34	42
lime (grey)	42	50
DRY HOLE---PLUGGED		

(Use a second sheet if needed)

18. Elevation: 890 (from map) 870
Topography:
___ Hill
___ Slope
___ Upland
X Valley

19. Remarks: Customer is aware of State regulation and agrees to install a 4" square re-enforced concrete platform around top of well.
Laura S. Hadd

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.
F.E. Young Drilling 240
Business name License No.
Address 6355 Robinhood Ln.
Signed F.E. Young Date 10-76
Authorized representative

T 13 R 23 E/W Sec 16 1/4 SW 1/4 SW 1/4 SW

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

Form WWC-5

BR = 845

MI-1023