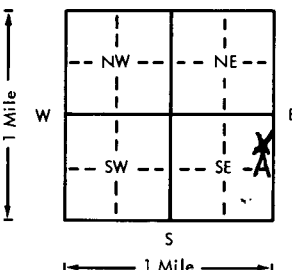


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>Dickinson</u> Fraction <u>Se 1/4 Ne 1/4 Se 1/4</u> Section number <u>13</u> Township number <u>T 14 S R 2</u> Range number <u>EW</u>	
2. Distance and direction from nearest town or city: <u>2 W 2 1/2 N</u> Street address of well location if in city: <u>Narame</u>	
3. Owner of well: <u>Dale Kauffman</u> R.R. or street: <u>BR 2</u> City, state, zip code: <u>Enterprise Ke. 67441</u>	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
	From To
<u>Top Soil</u>	<u>0 3</u>
<u>lime Stone</u>	<u>3 6</u>
<u>yellow + Red Clay</u>	<u>6 22</u>
<u>Blue Shale</u>	<u>22 35</u>
<u>Some Water</u>	<u>35 58</u>
<u>Blue Shale</u>	<u>36 58</u>
<u>Water</u>	<u>58 60</u>
<u>White Rock</u>	<u>60 63</u>
(Use a second sheet if needed)	
18. Elevation:  Topography: <input checked="" type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>Owner to run concrete slab around well 4'x4'x4'</u>
6. Bore hole dia. <u>9-2</u> in. Completion date <u>7-27-79</u> Well depth <u>63</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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
9. Casing: Material <u>Styrene</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>36</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>200 wall</u> /ft. Dia. <u>5</u> in. to <u>63</u> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gage No. <u>200 wall</u>	
10. Screen: Manufacturer's name <u>Cer mac</u> Type <u>Styrene</u> Dia. <u>5"</u> Slot/gauze <u>5</u> Length <u>20</u> Set between <u>35</u> ft. and <u>45</u> ft. <u>53</u> ft. and <u>63</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>38</u>	
11. Static water level: <u>25</u> ft. below land surface Date <u>4-26-79</u> mo./day/yr.	
12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.	
13. Water sample submitted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date <input type="checkbox"/> mo./day/yr.	
14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <input type="checkbox"/> _____ 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>3</u> ft. to <u>13</u> ft.	
16. Nearest source of possible contamination: <u>Sewer</u> ft. <u>75+</u> Direction <u>N</u> Type <u>line</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	
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. <u>Backhus Drg. 180</u> Business name _____ License No. _____ Address <u>Tampa, Ke.</u> Signed <u>Paul Backhus</u> Date <u>4-21-79</u> Authorized representative	

14 - 20 - 13 SE W 1/4 1/4 1/4

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

Form WWC-5