

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>Ne 1/4 Se 1/4 se 1/4</u> Section number <u>13</u> Township number <u>T 14 S</u> Range number <u>R 2</u> <u>EA</u>	
2. Distance and direction from nearest town or city: <u>2 W 1 1/2 N</u> Street address of well location if in city: <u>Navarre</u>	
3. Owner of well: <u>Dale Kautt Man</u> R.R. or street: <u>RR 2</u> City, state, zip code: <u>Enterprise, Mo.</u>	
4. Locate with "X" in section below: Sketch map:	
6. Bore hole dia. <u>7 1/2</u> in. Completion date <u>7-7-78</u> Well depth <u>76</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 type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" 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"/> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> in. RMP: <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight: <u>2440</u> lbs./ft. Dia. <u>5</u> in. to <u>7 1/2</u> ft. depth Wall Thickness: <u>inches</u> or Dia. <u>in.</u> to <u>ft.</u> depth gage No. <u>2584</u>	
5. Type and color of material	
	From To
<u>Top Soil</u>	<u>0</u> <u>2</u>
<u>Red Clay</u>	<u>2</u> <u>8</u>
<u>Lime Stone</u>	<u>8</u> <u>12</u>
<u>Yellow Clay</u>	<u>12</u> <u>32</u>
<u>Some Water</u>	<u>32</u> <u>33</u>
<u>Yellow + Gray Shale</u>	<u>33</u> <u>52</u>
<u>Blue Shale</u>	<u>52</u> <u>54</u>
<u>Some Water</u>	<u>54</u>
<u>Blue Shale</u>	<u>54</u> <u>70</u>
<u>Water</u>	<u>70</u> <u>71</u>
<u>Blue Shale</u>	<u>71</u> <u>76</u>
10. Screen: Manufacturer's name <u>A.P.T.M.</u> Type <u>PVC</u> Dia. <u>5 1/2</u> Slot/gauze <u>2</u> Length <u>30</u> Set between <u>65</u> ft. and <u>35</u> ft. <u>60</u> ft. and <u>70 3/4</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>30</u>	
11. Static water level: <u>30</u> ft. below land surface Date <u>7-7-78</u> mo./day/yr.	
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. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Date _____	
14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter _____ inches above grade	
15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>70</u> ft.	
16. Nearest source of possible contamination: <u>Hog Barn</u> ft. <u>60</u> Direction <u>SW</u> Type <u>Barn</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: Topography: <input checked="" type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> 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. Business name <u>Bac. Khue Dng. 180</u> License No. _____ Address <u>Tampa, Mo.</u> Signed <u>Paul Baer</u> Date <u>7-7-78</u> Authorized representative	

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

Form WWC-5