

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

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

NO 1

1 Location of well:	County <b>OSAGE</b>	Township name <b>N 7 S W 4 S W 4</b>	Fraction <b>1</b>	Section number <b>15</b>	Town number <b>15</b>	Range number <b>15</b>
Distance and direction from nearest town or city: <b>1 MILE SOUTH 1 MILE EAST SCANTON MS</b>			3 Owner of well: <b>WITTMER FARM REALTY INC Address: 1136 WAKAMAKA TOPEKA KANSAS 66604</b>			
Locate with "X" in section below: N W E S 1 Mile		Sketch map: <b>TOWNSHIP RD</b>		4 Well depth: <b>119</b> ft. Date of completion <b>7-30-76</b> Well diameter <b>5</b> in.		
2 Type and color of material				5 <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		
				6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>		
CLAY LIME BROWN SHALE LIME BLUE MEDIUM HARD SHALE LIME SHALE BLUE SHALE BLACK LIME SHALE				7 Casing: Material <b>STAY</b> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12"</b> in. Diam. _____ Weight _____ lbs./ft. _____ <b>0</b> in. to <b>119</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth		
				8 Screen: Manufacturer <b>3HOP</b> Type <b>STAY</b> Dia. <b>5"</b> Slot/gauze <b>3/16"</b> Length <b>96'</b> Set between <b>0</b> ft. and <b>119</b> ft. _____ Fittings: Gravel pack <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material _____		
OWNER TO POUR 4'X4'X4" SLAB				9 Static water level: <b>25</b> ft. below land surface Date <b>7-30-76</b>		
				10 Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>105 GPH</b> g.p.m.		
(use a second sheet if needed)				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				12 Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade <b>12"</b>		
16 Remarks: elevation  Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From <b>0</b> ft. to <b>18</b> ft.		
				14 Nearest source of possible contamination: ft. _____ Direction <b>LINCOLN</b> Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		
17 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. <b>JUNGMANN BROS DRILLING 119</b> Business name _____ License No. _____ Address <b>CADDO DALE FARMS</b> Signed _____ Date <b>7-30-76</b> Authorized representative				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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		

15 15E 1 SW SW