

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 28-29

1. Location of well:		County Morris	Fraction NE 1/4 SE 1/4 SE 1/4	Section number 27	Township number T 15 S R 0 EW	Range number
2. Distance and direction from nearest town or city: 4 mile North of Council Grove, Kan Street address of well location if in city:			3. Owner of well: Don Hunter R.R. or street: Council Grove Kan City, state, zip code:			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 6 1/2 in. Completion date 4-20-76 Well depth 88 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		
5. Type and color of material		From	To	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 type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
Topsoil - Blk		0	2	9. Casing: Material P165 Height: Above or below Threaded <input type="checkbox"/> Welded glw Surface 18 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 60 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gage No. 200		
Shale & Broken Lime - Yel		2	16	10. Screen: Manufacturer's name Sunflower Type RMP Dia. 5" Slot/gauge Y8 Length 28 Set between 60 ft. and 88 ft. _____ ft. and _____ ft. Gravel pack? NO Size range of material _____		
Flint Shell		16	17	11. Static water level: _____ mo./day/yr. 60 ft. below land surface Date 4-20-76		
Shale - Green		17	18	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 26 g.p.m.		
Red Rock Red		18	23	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
Lime - Gray		23	24	14. Well head completion: <input type="checkbox"/> Pitless adapter 18 Inches above grade		
Shale - Gray		24	25	15. Well grouted? Yes With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 4 ft. to 16 ft.		
Flint or Lime - Gray		25	39	16. Nearest source of possible contamination: ft. 70 Direction SE Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Lime - Gray very Abrasive		39	43	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		
Shale - Blu		43	45	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. Zinn Water Well Drilling Business name _____ License No. _____ Address Lost Springs Kan Signed Joseph A. Zinn Date 4-20-76 Authorized representative		
Flint or Lime - Gray Very Abrasive		45	48			
Shale - Blu		48	49			
Lime - Gray		49	54			
Shale - Gray		54	55			
Lime - Wht		55	60			
Cont. (Use a second sheet if needed)						
18. Elevation:		19. Remarks: Reinforced Concrete slab 4'x4'x4" Will be installed by customer Don Hunter		20. Water well contractor's certification: (Continued)		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5

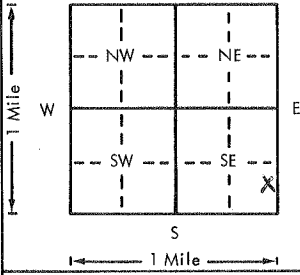
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WATER WELL RECORD
KSA 82a-1201-1215

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(Water well Contractors)
Topeka, Kansas 66620

#1 Cont. 28-29

1. Location of well:	County <u>Morris</u>	Fraction <u>NE 1/4 SE 1/4 SE 1/4</u>	Section number <u>27</u>	Township number <u>T 15 S R 8</u>	Range number <u>EW</u>
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: <u>Don Hunter</u> R.R. or street: <u>Council Grove, Kan</u> City, state, zip code:		
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		6. Bore hole dia. _____ in. Completion date _____ Well depth _____ ft.	
5. Type and color of material		From		To	
		<u>Shale - Brownish Red</u> water		<u>60 64</u>	
		<u>LIME - Gray</u>		<u>64 68</u>	
		<u>Shale - Lite Gray</u>		<u>68 71</u>	
		<u>LIME - Very Abrasive - Gray</u>		<u>71 77</u>	
		<u>Shale - Gray</u>		<u>77 82</u>	
		<u>LIME - Gray</u>		<u>82 87</u>	
		<u>Red Rock - Red thin strip</u>		<u>87 88</u>	
		<u>LIME - Total Depth</u>		<u>88</u>	
		(Use a second sheet if needed)			
				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 type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
				9. Casing: Material _____ 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 _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? <input type="checkbox"/> Size range of material _____	
				11. Static water level: _____ 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. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____	
				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
				15. Well grouted? _____ With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From _____ ft. to _____ ft.	
				16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: _____ 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	
18. Elevation:		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 _____ License No. _____ Address _____ Signed _____ Date _____ Authorized representative	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley					

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