

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 Marion	Fraction Se 1/4 Se 1/4 Se 1/4	Section number 14	Township number T 19 S	Range number R 2 E
2. Distance and direction from nearest town or city: 2 E 3 1/4 N			3. Owner of well: Charles Pienerz			
Street address of well location if in city: Hillsboro			R.R. or street: BRI			
			City, state, zip code: Hillsboro KS. 67063			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. _____ in. Completion date _____		
				Well depth 73 ft. 3-16-77		
				7. <input checked="" type="checkbox"/> Cable tool _____ Rotary _____ Driven _____ Dug _____ _____ Hollow rod _____ Jetted _____ Bored _____ Reverse rotary		
5. Type and color of material		From	To	8. Use: _____ Domestic _____ Public supply _____ Industry _____ Irrigation _____ Air conditioning <input checked="" type="checkbox"/> Stock _____ Lawn _____ Oil field water _____ Other		
Top Soil		0	2	9. Casing: Material PVC Height: Above or below		
yellow clay		2	46	Threaded _____ Welded _____ Surface 16 in.		
Some Water		46	47	RMP _____ PVC <input checked="" type="checkbox"/> Weight 50140 lbs./ft.		
Blue + Gray Shale		47	68	Dia. 5 in. to 23 ft. depth Wall Thickness: inches or		
Water		68	69	Dia. _____ in. to _____ ft. depth gage No. 230		
lime stone		69	73	10. Screen: Manufacturer's name _____		
				Type PVC Dia: 5400		
				Slot/gauze 50 Length 30		
				Set between 40 ft. and 50 ft.		
				60 ft. and 70 ft.		
				Gravel pack? <input checked="" type="checkbox"/> Size range of material 30		
				11. Static water level: _____ mo./day/yr.		
				35 ft. below land surface Date 3-16-77		
				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 _____ Date _____		
				14. Well head completion:		
				<input checked="" type="checkbox"/> Pitless adapter _____ inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/>		
				With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete		
				Depth: From 3 ft. to 13 ft.		
				16. Nearest source of possible contamination: Cattle		
				ft. 60 Direction W Type Corral		
				Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ 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:		
				_____ Submersible _____ Turbine		
				_____ Jet _____ Reciprocating		
				_____ Centrifugal _____ Other		
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography:				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
_____ Hill				Backhus Drg. 180		
_____ Slope				Business name _____ License No. _____		
<input checked="" type="checkbox"/> Upland				Address Tampa KS		
_____ Valley				Signed Paul Backhus Date 3-16-77		
				Authorized representative 3-16-77		

T 19 S R 2 E Sec 14

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

Form WWC-5