

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>MARSHALL</u>	Fracture: <u>NW 1/4 NW 1/4 NW 1/4</u>	Section number: <u>75</u>	Township number: <u>T 1</u>	Range number: <u>S R 7E of 6th PM</u>
2. Distance and direction from nearest town or city: <u>8 MILES NORTH 1 MILE EAST 1/4 MILE NORTH</u>		3. Owner of well: <u>HENRY HOPPENSTEDT</u>			
Street address of well location if in city: <u>LIVES ON EAST SIDE ROAD</u>		R.R. or street: <u>RR</u>			
		City, state, zip code: <u>HERKIMER KANSAS 66433</u>			
4. Locate with "X" in section below: <div style="text-align: center;"> </div>		Sketch map:		6. Bore hole dia. <u>9 1/2</u> in. Completion date <u>4-9-76</u> Well depth <u>45</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 type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
				9. Casing: Material <u>PVC</u> Height: <u>Above or below</u> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>72</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. <u>5</u> in. to <u>45</u> ft. depth Wall Thickness: <u>inches or</u> Dia. <u>in.</u> to <u>ft.</u> depth <u>inches or</u>	
5. Type and color of material		From	To	10. Screen: Manufacturer's name <u>PUMPCO</u>	
<u>RED CLAY</u>		<u>0</u>	<u>24</u>	Type <u>P.V.C.</u> Dia. <u>5"</u>	
<u>YELLOW LIMESTONE ROCK</u>		<u>24</u>	<u>34</u>	Slot/gauge <u>.040</u> Length <u>20'</u>	
<u>BLUE SHALE</u>		<u>34</u>	<u>45</u>	Set between <u>45</u> ft. and <u>25</u> ft.	
				Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/8" X 1/2"</u>	
				11. Static water level: <u>26</u> ft. below land surface Date <u>4-9-76</u>	
				12. Pumping level below land surfaces: <u>BUCKETED</u>	
				____ ft. after ____ hrs. pumping ____ g.p.m.	
				____ ft. after ____ hrs. pumping ____ g.p.m.	
				Estimated maximum yield <u>60</u> g.p.m.	
				13. Water sample submitted: ____ mo./day/yr.	
				Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u>4-9-76</u>	
				14. Well head completion: <u>N/A</u>	
				____ Pitless adapter ____ Inches above grade	
				15. Well grouted? <u>YES</u>	
				With: ____ Neat cement ____ Bentonite <input checked="" type="checkbox"/> Concrete	
				Depth: From <u>15</u> ft. to <u>5</u> ft.	
				16. Nearest source of possible contamination: <u>200</u> ft. Direction <u>SOUTH</u> Type <u>LATERAL</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:	
				____ Submersible _____ Turbine	
				____ Jet _____ Reciprocating	
				____ Centrifugal _____ Other	
18. Elevation:		19. Remarks: <u>∞</u>		20. Water well contractor's certification:	
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Shades Drilling Co 237</u> Business name <u>Blue Rapids</u> License No. _____ Address <u>Haroldsville</u> Signed <u>Haroldsville</u> Date <u>4-9</u> Authorized representative	

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

Form WWC-5