

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 <b>Marion</b> Fraction <b>SE 1/4 SE 1/4 NE 1/4</b> Section number <b>5</b> Township number <b>T 20 - S 5</b> Range number <b>R 4 E E/W</b>	
2. Distance and direction from nearest town or city: <b>In city</b> Street address of well location if in city: <b>Thrope</b>	
3. Owner of well: <b>Art Scherming</b> R.R. or street: <b>Thrope</b> City, state, zip code: <b>Marion, Mo.</b>	
4. Locate with "X" in section below: Sketch map: <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <p>1 Mile</p> </div> </div>	
5. Type and color of material	
	From To
<b>lime Stone</b>	<b>0 17</b>
<b>yellow Clay</b>	<b>17 26</b>
<b>lime Stone</b>	<b>26 42</b>
<b>Red Shale</b>	<b>42 60</b>
<b>Some Water</b>	<b>60 61</b>
<b>Gray Rock</b>	<b>61 77</b>
<b>Water</b>	<b>77 78</b>
<b>Blue Shale</b>	<b>78 81</b>
(Use a second sheet if needed)	
18. Elevation:	19. Remarks:
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	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. <b>Backhus Dr. Co. 100</b> Business name License No. Address <b>Tampa, Mo.</b> Signed <b>Paul Backhus</b> Date <b>4-15-77</b> Authorized representative

6. Bore hole dia. <b>8 1/2</b> in. Completion date <b>4-15-77</b> Well depth <b>81</b> 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 type="checkbox"/> Stock <input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other
9. Casing: Material <b>PVC</b> Height: <b>0</b> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>75</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>34.4</b> lbs./ft. Dia. <b>5</b> in. to <b>8 1/2</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>1258</b>
10. Screen: Manufacturer's name <b>Certain Seed</b> Type <b>PVC</b> Dia. <b>5 1/2</b> Slot/gauze <b>5</b> Length <b>20</b> Set between <b>35</b> ft. and <b>65</b> ft. <b>71</b> ft. and <b>81</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>20</b>
11. Static water level: <b>53</b> ft. below land surface Date <b>4-15-77</b> mo./day/yr.
12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.
13. Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date <input type="checkbox"/>
14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <input type="checkbox"/> 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 <b>0.5</b> ft. to <b>13</b> ft.
16. Nearest source of possible contamination: <b>city</b> ft. <b>15</b> Direction <b>N</b> Type <b>sewerline</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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

T 20 - S 5  
 R 4 E  
 Sec 5  
 SE SE NE  
 1/4 1/4 1/4