

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

*Marion County Lake*

1. Location of well: County <u>Marion</u> Fraction <u>NW 1/4 NW 1/4 NW 1/4</u> Section number <u>10</u> Township number T <u>20</u> S R <u>H E</u> E/W	
2. Distance and direction from nearest town or city: <u>One mile East 1/2 mile South of Marion</u>	
3. Owner of well: <u>WILLIAM H. TUCKER</u> R.R. or street: <u>Marion Co. Lake</u> City, state, zip code: <u>Marion Kans 66864</u>	
4. Locote with "X" in section below: Sketch map:	
5. Type and color of material	
	From To
<u>Yumbo</u>	<u>0</u> <u>5</u>
<u>Yine</u>	<u>5</u> <u>45</u>
<u>Red Rock</u>	<u>45</u> <u>55</u>
<u>Brown shale</u>	<u>55</u> <u>65</u>
<u>Blue shale</u>	<u>65</u> <u>70</u>
<u>Yine</u>	<u>70</u> <u>80</u>
(Use a second sheet if needed)	
18. Elevation:	19. Remarks:
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	6. Bore hole dia. <u>8</u> in. Completion date <u>Nov 19 1979</u> Well depth <u>75</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>plus</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>14</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>See 40</u> lbs./ft. Dia. <u>5</u> in. to <u>75</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>75</u> ft. depth gage No. <u>See 40</u> 10. Screen: Manufacturer's name <u>Certainted</u> Type <u>PVC</u> Dia. <u>5 inch</u> Slot/gauze <u>3/6</u> Length <u>20 ft</u> Set between <u>55</u> ft. and <u>75</u> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>3/8</u> 11. Static water level: _____ mo./day/yr. <u>50</u> ft. below land surface Date <u>21 Nov 1979</u> 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 <input type="checkbox"/> Date _____ 14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter _____ Inches above grade 15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>30</u> ft. 16. Nearest source of possible contamination: ft. <u>75</u> Direction <u>North</u> Type <u>Septic tank</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: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other
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. <u>Schling Water Well</u> Business name License No. _____ Address <u>Marion Kans 228</u> <u>William Schling</u> Date <u>21 Nov 1979</u> Authorized representative	

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 Sec 10  
 NW 1/4 NW 1/4 NW 1/4  
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