

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 NE 1/4 NE 1/4 NE 1/4 | Section number 2 | Township number T 21 S R | Range number 1 EW | | | | | | | | | | | | | | |
|--|-------------------------|---|--|------------------------------------|-----------------------------|-----|------------|------|------------|-------|------------|-------|-------|----|------------|-------|--|--|--|
| 2. Distance and direction from nearest town or city: 1 N | | | 3. Owner of well: Dennis Fleming | | | | | | | | | | | | | | | | |
| Street address of well location if in city: 2 1/4 E Goersci | | | R.R. or street: BB2 | | | | | | | | | | | | | | | | |
| 4. Locate with "X" in section below: | | | 6. Bore hole dia. 5 in. Completion date 11-22-75 | | | | | | | | | | | | | | | | |
| | | | Well depth 60 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 | | | 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 | | | | | | | | | | | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;">From</th> <th style="width:20%;">To</th> </tr> </thead> <tbody> <tr> <td>Top Soil</td> <td>0 3</td> </tr> <tr> <td>Blue Shale</td> <td>3 32</td> </tr> <tr> <td>Lime Stone</td> <td>32 40</td> </tr> <tr> <td>Blue Shale</td> <td>40 48</td> </tr> <tr> <td>Water</td> <td>48</td> </tr> <tr> <td>Blue Shale</td> <td>48 60</td> </tr> </tbody> </table> | | | From | To | Top Soil | 0 3 | Blue Shale | 3 32 | Lime Stone | 32 40 | Blue Shale | 40 48 | Water | 48 | Blue Shale | 48 60 | 9. Casing: Material PVC Height: Above or below | | |
| | | | From | To | | | | | | | | | | | | | | | |
| Top Soil | 0 3 | | | | | | | | | | | | | | | | | | |
| Blue Shale | 3 32 | | | | | | | | | | | | | | | | | | |
| Lime Stone | 32 40 | | | | | | | | | | | | | | | | | | |
| Blue Shale | 40 48 | | | | | | | | | | | | | | | | | | |
| Water | 48 | | | | | | | | | | | | | | | | | | |
| Blue Shale | 48 60 | | | | | | | | | | | | | | | | | | |
| | | | Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. | | | | | | | | | | | | | | | | |
| | | | RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 160 lbs./ft. | | | | | | | | | | | | | | | | |
| | | | Dia. 5 in. to 60 ft. depth; Wall Thickness: inches or | | | | | | | | | | | | | | | | |
| | | | Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth; gage No. 025 | | | | | | | | | | | | | | | | |
| | | | 10. Screen: Manufacturer's name Pumped Supply | | | | | | | | | | | | | | | | |
| | | | Type PVC Dia. 5 in. | | | | | | | | | | | | | | | | |
| | | | Slot/gauze 70 Length 20 | | | | | | | | | | | | | | | | |
| | | | Set between 70 ft. and 60 ft. | | | | | | | | | | | | | | | | |
| | | | Gravel pack? <input checked="" type="checkbox"/> Size range of material 5 to 30 | | | | | | | | | | | | | | | | |
| | | | 11. Static water level: 30 ft. below land surface Date 11-22-75 | | | | | | | | | | | | | | | | |
| | | | 12. Pumping level below land surfaces: | | | | | | | | | | | | | | | | |
| | | | 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 type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete | | | | | | | | | | | | | | | | |
| | | | Depth: From 3 ft. to 13 ft. | | | | | | | | | | | | | | | | |
| | | | 16. Nearest source of possible contamination: septic | | | | | | | | | | | | | | | | |
| | | | ft. 70 Direction SE Type Tank | | | | | | | | | | | | | | | | |
| | | | 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 | | | | | | | | | | | | | | | | |
| 18. Elevation: | | | 20. Water well contractor's certification: | | | | | | | | | | | | | | | | |
| 19. Remarks: Owner to run concrete slab around well | | | This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. | | | | | | | | | | | | | | | | |
| Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | | | Backhus Drilling 180 | | | | | | | | | | | | | | | | |
| | | | Business name _____ License No. _____ | | | | | | | | | | | | | | | | |
| | | | Address Dampa, KS | | | | | | | | | | | | | | | | |
| | | | Signed Paul Backhus Date 12-16-75 | | | | | | | | | | | | | | | | |
| | | | Authorized representative _____ | | | | | | | | | | | | | | | | |

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