

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>MARION</u> Fraction <u>SW 1/4 SW 1/4 SE 1/4</u> Section number <u>5</u> Township number <u>T 21 S R 1 E</u> Range number <u>1</u>	
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>310 MARION</u>	
3. Owner of well: <u>EIMER W SCHMIDT</u> R.R. or street: <u>310 MARION</u> City, state, zip code: <u>GOESSEL KANS 67053</u>	
4. Locate with "X" in section below: <div style="display: flex; align-items: center;"> <div style="margin-right: 20px;"> <p>Sketch map: <u>Alley</u></p> </div> <div> <p>Well depth <u>45</u> ft.</p> <p>6. Bore hole dia. <u>10</u> in. Completion date <u>8-21-76</u></p> <p>7. <input checked="" type="checkbox"/> Cable tool <input checked="" 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</p> <p>8. Use: Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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</p> <p>9. Casing: Material <u>PVC</u> Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>18</u> in. RMP <input checked="" type="checkbox"/> PVC Weight <u>1.50</u> lbs./ft. Dia. <u>5</u> in. to <u>45</u> ft. depth Wall Thickness: <u>inches</u> or Dia. <u>in.</u> to <u>ft.</u> depth gage No. <u>100</u></p> <p>10. Screen: Manufacturer's name <u>J&amp;L</u> Type <u>RMP</u> Dia. <u>5</u> Slot/gauze <u>.06</u> Length <u>30</u> Set between <u>15</u> ft. and <u>45</u> ft. Gravel pack? <u>yes</u> Size range of material <u>18</u></p> <p>11. Static water level: <u>8-21-76</u> mo./day/yr. <u>8</u> ft. below land surface Date</p> <p>12. Pumping level below land surfaces: <u>8</u> ft. after <u>1</u> hrs. pumping <u>25</u> g.p.m. <u>ft.</u> after <u>hrs.</u> pumping <u>g.p.m.</u> Estimated maximum yield <u>25+</u> g.p.m.</p> <p>13. Water sample submitted: <u>mo./day/yr.</u> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date</p> <p>14. Well head completion: <input type="checkbox"/> Pitless adapter <u>18</u> inches above grade</p> <p>15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.</p> <p>16. Nearest source of possible contamination: <u>city</u> ft. <u>30</u> Direction <u>N</u> Type <u>SEWER</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>pump co</u> Model number <u>HP 1/2</u> Volts <u>230</u> Length of drop pipe <u>30</u> ft. capacity <u>14</u> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other</p> </div> </div>	
5. Type and color of material	
	From To
<del>top soil</del>	0 2
Clay Brown	2 5
Sand Fine	5 8
Sand Fine to Medium Coarse	8-30
<del>limestone Rock</del>	30 32
Shale Black	32 45
(Use a second sheet if needed)	
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <u>Mr Schmidt will Run 4'x4'</u> <u>Cont slab around well</u>  <u>x Eimer W. Schmidt</u>
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>D&amp;R Well Service</u> License No. <u>211</u> Business name <u>428 W 3rd Newton</u> Address <u>W. Schmidt</u> Date <u>9-2-76</u> Signed <u>W. Schmidt</u> Authorized representative	

T 21 S R 1 E  
 Sec 5 SW 1/4 SE 1/4

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

Form WWC-5