

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 1/4 SW 1/4 NW 1/4	Section number 23	Township number T 21 S R 1	Range number EW
2. Distance and direction from nearest town or city: 12 miles No. - 1 WEST - 3/4 N on East Side		3. Owner of well: Mr. John Schroeder		R.R. or street: 416 E 23 St	
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 10 in. Completion date Well depth 55 ft. 11 10 76	
				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	
				9. Casing: Material Plastic Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 34 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight 200 lbs./ft. Dia. 5 in. to 55 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gage No. 210 off in	
				10. Screen: Manufacturer's name Silaflo Plastic pipe in Type RMP Dia. 5 Slot/gauze 3/32 Length 34 Set between 15 ft. and 49 ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 to 1/2	
				11. Static water level: <input type="checkbox"/> mo./day/yr. 20 ft. below land surface Date 11 10 76	
				12. Pumping level below land surfaces: 20 ft. after 30 hrs. pumping 10 g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 15 g.p.m.	
				13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
				14. Well head completion: <input type="checkbox"/> Pitless adapter 24 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 0 ft. to 10 ft.	
				16. Nearest source of possible contamination: ft. 125 Direction NE Type oldwell 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	
18. Elevation:		19. Remarks:		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. Therese Bueckle 221 Business name Newton Kansas License No. <input type="checkbox"/> Address Newton Kansas Signed Therese Bueckle Date 11 12 76 Authorized representative	

T 21
 R 1
 W 23
 S SWNW
 Sec 1/4 1/4 1/4 1/4

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

Form WWC-5