

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<br><b>HARVEY</b> | Fraction<br><b>SE 1/4 NW 1/4 SE 1/4</b>  | Section number<br><b>5</b> | Township number<br>T <b>23</b> S R <b>1</b> <b>EW</b> | Range number |
| 2. Distance and direction from nearest town or city:<br>Street address of well location if in city: <b>SAME</b> |  |                         | 3. Owner of well: <b>LARRY VOTH</b><br>R.R. or street: <b>#2 JASPER COURT</b><br>City, state, zip code: <b>N. NEWTON, KNS</b>  |                            |   |              |
| 4. Locate with "X" in section below:<br>Sketch map:   |  |                         | 6. Bore hole dia. <b>12</b> in. Completion date _____<br>Well depth <b>39</b> ft. <b>6/15/76</b>   |                            |   |              |
|   |  |                         | 7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><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<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other                     |                            |   |              |
| 5. Type and color of material   |  |                         | 9. Casing: Material <b>Plastic</b> Height: Above or below<br>Threaded _____ Welded <input checked="" type="checkbox"/> Surface <b>12"</b> in.<br>RMP _____ PVC <input checked="" type="checkbox"/> Weight <b>3.23</b> lbs./ft.<br>Dia. <b>6</b> in. to <b>39</b> ft. depth Wall Thickness: inches or<br>Dia. _____ in. to _____ ft. depth gage No. <b>255</b>              |                            |   |              |
|   |  |                         | 10. Screen: Manufacturer's name _____<br><b>Robin - Tech - own slot</b><br>Type <b>PVC</b> Dia. <b>6"</b><br>Slot/gauze <b>264</b> Length <b>20'</b><br>Set between <b>19</b> ft. and <b>39</b> ft.<br>_____ ft. and _____ ft.<br>Gravel pack? <b>YES</b> Size range of material <b>1/8-1/4</b>  |                            |   |              |
|   |  |                         | 11. Static water level: _____ mo./day/yr.<br><b>13</b> ft. below land surface Date <b>6/15/76</b>  |                            |   |              |
|   |  |                         | 12. Pumping level below land surfaces:<br><b>39</b> ft. after <b>1</b> hrs. pumping <b>8</b> g.p.m.<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>Estimated maximum yield <b>8</b> g.p.m.  |                            |   |              |
|   |  |                         | 13. Water sample submitted: _____ mo./day/yr.<br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____  |                            |   |              |
|   |  |                         | 14. Well head completion:<br><input type="checkbox"/> Pitless adapter <b>12"</b> inches above grade  |                            |   |              |
|   |  |                         | 15. Well grouted? <input checked="" type="checkbox"/><br>With: <input checked="" type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete<br>Depth: From <b>0</b> ft. to <b>6'</b> ft.   |                            |   |              |
|   |  |                         | 16. Nearest source of possible contamination:<br>ft. <b>48'</b> Direction <b>EAST</b> Type <b>SEWER</b><br>Well disinfected upon completion? _____ Yes <input checked="" type="checkbox"/> No  |                            |   |              |
|   |  |                         | 17. Pump: _____ Not installed<br>Manufacturer's name <b>DEMPSTER</b><br>Model number <b>DM-3352HP</b> <b>1/3</b> Volts <b>115</b><br>Length of drop pipe <b>33</b> ft. capacity <b>12</b> g.p.m.<br>Type: <b>with EEPM FLOW CONTROL</b><br><input checked="" type="checkbox"/> Submersible _____ Turbine<br>_____ Jet _____ Reciprocating<br>_____ Centrifugal _____ Other |                            |   |              |
| 18. Elevation:  |  |                         | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.<br><b>PAUL'S INC</b> #175<br>Business name _____ License No. _____<br>Address <b>HESTON, KNS</b><br>Signed <b>Paul Brubaker</b> Date <b>6/15/76</b><br>Authorized representative                                 |                            |   |              |
| 19. Remarks:<br><b>hole completed 1 started by hand - log not positive</b>                                      |  |                         |  |                            |   |              |

23  
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 10  
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 SE NW SE  
 1/4 1/4 1/4