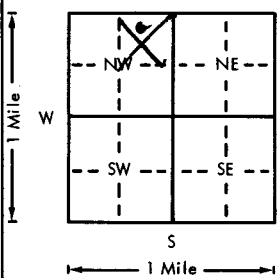


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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>Harvey</u>	Fraction <u>N 1/2 NE 1/4 NW 1/4</u>	Section number <u>18</u>	Township number T <u>23</u> S R <u>1</u> E	Range number <u>1</u>
2. Distance and direction from nearest town or city:		3. Owner of well: <u>Patrick P Machmes</u> 14 Columbus Court Newton Kansas, 67114				
Street address of well location if in city: <u>14 Columbus Court</u>		City, state, zip code:				
4. Locate with "X" in section below:		Sketch map:				
						
5. Type and color of material		From	To	6. Bore hole dia. <u>10</u> in. Completion date <u>Aug 10 76</u> Well depth <u>89</u> ft.		
<u>Black Soil</u>		<u>0</u>	<u>6</u>	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		
<u>White Clay</u>		<u>6</u>	<u>12</u>	8. Use: <input 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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
<u>Blue Shale</u>		<u>12</u>	<u>25</u>	9. Casing: Material <u>Plastic</u> Height: <u>above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>200</u> lbs./ft. Dia. <u>6</u> in. to <u>89</u> ft. depth Wall Thickness: inches or Dia. <u>6</u> in. to <u>89</u> ft. depth gage No. <u>2110412</u>		
<u>Limestone</u>		<u>25</u>	<u>28</u>	10. Screen Manufacturer's name <u>Surflow Plastic Pipe Inc</u> Type <u>RMP</u> Dia. <u>6</u> Slot/gauze <u>3/32</u> Length <u>40</u> Set between <u>30</u> ft. and <u>30</u> ft. <u>30</u> ft. and <u>80</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/2</u>		
<u>Blue Shale</u>		<u>28</u>	<u>55</u>	11. Static water level: <u>25</u> ft. below land surface Date <u>Aug 10 76</u>		
<u>Rock</u>		<u>55</u>	<u>60</u>	12. Pumping level below land surfaces: <u>25</u> ft. after <u>40</u> hrs. pumping <u>16</u> g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield <u>20</u> g.p.m.		
<u>Blue Shale</u>		<u>60</u>	<u>73</u>	13. Water sample submitted: <u>Yes</u> <input checked="" type="checkbox"/> No <input type="checkbox"/> Date		
<u>Limestone Rock</u>		<u>73</u>	<u>75</u>	14. Well head completion: <input type="checkbox"/> Pitless adapter <u>18</u> inches above grade		
<u>Blue Shale</u>		<u>75</u>	<u>89</u>	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>0</u> ft. to <u>10</u> ft.		
				16. Nearest source of possible contamination: ft. <u>20</u> Direction <u>N</u> Type <u>Superline</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <u>Not installed</u> Manufacturer's name <u>Gould</u> Model number <u>1/2</u> HP <u>1/2</u> Volts <u>220</u> Length of drop pipe <u>80</u> ft. capacity <u>10</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		
				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>Frank Budd</u> <u>221</u> Business name License No. Address <u>14 Newton Kansas</u> Signed <u>Frank Budd</u> Date <u>11/17/76</u> Authorized representative		
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5