

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>NW 1/4 NW 1/4 SW 1/4</b>   | Section number<br><b>18</b>   | Township number<br>T <b>23</b> S R   | Range number<br>1 <b>(E/W)</b>  |
| 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>WALTER FOTH</b><br>R.R. or street: <b>#3 Lenoave Court</b><br>City, state, zip code: <b>Newton, Kansas 67114</b> |   |  |   |
| 4. Locate with "X" in section below:  |  | Sketch map:                    |   |   | 6. Bore hole dia. <b>12</b> in. Completion date _____<br>Well depth <b>50</b> ft.  |   |
|   |  |                                |   |   | 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 |   |
| 5. Type and color of material   |  | From                           | To  | 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  |  |   |
|   |  |                                |   | 9. Casing: Material <b>plastic</b> Height: <b>above</b> or below<br>Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in.<br>RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>3.22</b> lbs./ft.<br>Dia. <b>6</b> in. to <b>50</b> ft. depth Wall Thickness: inches or<br>Dia. _____ in. to _____ ft. depth gage No. <b>2.555</b>                 |  |   |
|   |  |                                |   | 10. Screen: Manufacturer's name <b>Rabin-Tech - own slot</b><br>Type <b>Disc</b> Dia. <b>6"</b><br>Slot/gauze <b>1/8"</b> Length <b>20'</b><br>Set between <b>30</b> ft. and <b>50</b> ft.<br>_____ ft. and _____ ft.<br>Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8-1/4</b>   |  |   |
|   |  |                                |   | 11. Static water level: _____ mo./day/yr.<br><b>24</b> ft. below land surface Date _____  |  |   |
|   |  |                                |   | 12. Pumping level below land surfaces:<br><b>35</b> ft. after <b>2</b> hrs. pumping <b>20</b> g.p.m.<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>Estimated maximum yield <b>20</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 checked="" 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 type="checkbox"/> Bentonite <input type="checkbox"/> Concrete<br>Depth: From <b>0</b> ft. to <b>10</b> ft.  |  |   |
|   |  |                                |   | 16. Nearest source of possible contamination:<br>ft. <b>25</b> Direction <b>EAST</b> Type <b>house sewer</b><br>Well disinfected upon completion? _____ Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>   |  |   |
|   |  |                                |   | 17. Pump: _____ Not installed<br>Manufacturer's name <b>KALLEY</b><br>Model number <b>S-1065-MF-752 3/4" 230</b><br>Length of drop pipe <b>40'</b> ft. capacity <b>18</b> g.p.m.<br>Type:<br><input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |  |   |
|   |  | (Use a second sheet if needed) |   |   |  |   |
| 18. Elevation:  |  | 19. Remarks:                   |   |   |  | 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 FAIR</b> <b>175</b><br>Business name _____ License No. _____<br>Address <b>HESSTON, KNS</b><br>Signed <b>Paul Bumbart</b> Date <b>4/27/14</b><br>Authorized representative |
| Topography:<br><input type="checkbox"/> Hill<br><input type="checkbox"/> Slope<br><input checked="" type="checkbox"/> Upland<br><input type="checkbox"/> Valley |  |                                |   |   |  |   |

T 23  
 R 18  
 Sec 18 NW 1/4 SW 1/4