

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

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

1 Location of well:	County <u>Butler</u>	Township name <u>24</u>	Fraction <u>M 1/4 S 1/4 SW 1/4 NE 1/4</u>	Section number <u>18</u>	Town number <u>M 1/4 C 24 S</u>	Range number <u>3 E</u>
Distance and direction from nearest town or city:			3 Owner of well: <u>Louise &amp; Ralte J Dyck</u>			
Street address of well location if in city: <u>516 N Locust</u>			Address: <u>Whitewater Kansas</u>			
Locate with "X" in section below:		Sketch map:		4 Well depth: <u>12 1/2 to 10 1/2</u> ft. Date of completion <u>8 15 76</u> Well diameter: <u>2 1/2</u> in.		
		<p style="text-align: center;">H 100</p>		5 <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		
				6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> <u>Latrine</u>		
2		Type and color of material		7 Casing: Material <u>plastic</u> Height: above/below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>18</u> in. Diam. <u>5</u> in. to <u>68</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>5</u> in. to <u>68</u> ft. depth		
				8 Screen: <u>Sunflow</u> plastic pipe Manufacturer <u>RMP</u> Dia. <u>3</u> in. Type <u>RMP</u> Slot/gauze <u>3/32</u> Length <u>40</u> Set between <u>20</u> ft. and <u>60</u> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1/4 to 1/8</u>		
				9 Static water level: <u>20</u> ft. below land surface Date <u>8 15 76</u>		
				10 Pumping level below land surfaces: <u>20</u> ft. after <u>25</u> hrs. pumping <u>20</u> g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <u>20</u> g.p.m.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				12 Well head completion: <input type="checkbox"/> Pitless adapter <u>18</u> inches above grade		
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> _____ Depth: From <u>0</u> ft. to <u>10</u> ft.		
				14 Nearest source of possible contamination: ft. <u>90</u> Direction <u>S</u> Type <u>sewer line</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Frank</u> Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input checked="" type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
16 Remarks: elevation		(use a second sheet if needed)		17 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 Buckle</u> <u>221</u> Business name License No. Address <u>RH Nuyton Kansas</u> Signed <u>Frank Buckle</u> Date <u>11/17/76</u> Authorized representative		

27 3E 18 SE SW NE