

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 Woodson | Fraction NW 1/4 NW 1/4 NW 1/4 | Section number 28 | Township number T 25 S R 14 E(N) | Range number 14 |
| 2. Distance and direction from nearest town or city: 2 MI NORTH | | | 3. Owner of well: MAYDON MEYERS | | | |
| Street address of well location if in city: 2 MI E 1 MI NORTH OF TONTO | | | R.R. or street: City, state, zip code: EUREKA KAN | | | |
| 4. Locate with "X" in section below: | | Sketch map: | | 6. Bore hole dia. 7 in. Completion date 1/21/81 Well depth 72 ft. | | |
| | | | | 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 | | From | To | 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 | | |
| YELLOW SOIL | | 0 | 1 | 9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded BL Surface 1 1/2 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 6 in. to 72 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 270 | | |
| SHELLY LIMESTONE | | 1 | 5 | 10. Screen: Manufacturer's name JESS LOWELL Type PVC Dio. 6 Slot/gauze 1/16 Length Set between 50 ft. and 90 ft. ft. and ft. Gravel pack? <input type="checkbox"/> Size range of material | | |
| SOAPSTONE | | 5 | 9 | 11. Static water level: mo./day/yr. 400 ft. below land surface Date 1/21/81 | | |
| COAL | | 9 | 11 | 12. Pumping level below land surfaces: ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield 10 g.p.m. | | |
| RED BED | | 11 | 15 | 13. Water sample submitted: mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date | | |
| GREEN SHALE | | 15 | 18 | 14. Well head completion: <input type="checkbox"/> Pitless adapter 12 Inches above grade | | |
| RED BED | | 18 | 19 | 15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 15 ft. | | |
| GREEN SHALE | | 19 | 42 | 16. Nearest source of possible contamination: ft. WEST Direction 150° Type WELL Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| WHITE SAND | | 42 | 52 | 17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name Model number HP Volts Length of drop pipe ft. capacity 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 | | |
| WHITE SAND | | 52 | 69 | 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. CUMMINGS WELL SERV 372 Business name License No. Address TONTO KAN Signed [Signature] Date 1/21/81 Authorized representative | | |
| GREEN SHALE | | 69 | 72 | | | |
| (Use a second sheet if needed) | | | | | | |
| 18. Elevation: | | 19. Remarks: THIS IS AN OIL FIELD MY MEYERS IS GOING TO RUN HIS OWN PUMP | | | | |
| Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | | | | | | |

T 25 S R 14 W E(N)
 Sec 28 NW 1/4 NW 1/4 NW 1/4

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

Form WWC-5