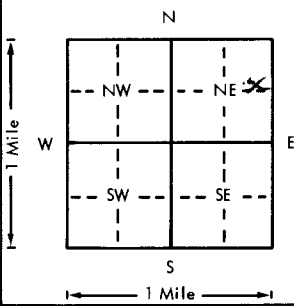
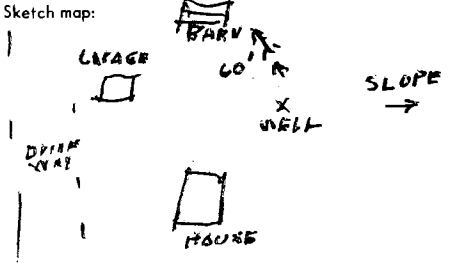


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 SE 1/4 NE 1/4 NE 1/4 | Section number 16 | Township number T 25 S R 15 | Range number 15 |
| 2. Distance and direction from nearest town or city: Street address of well location if in city: LOT. 1 BLOCK. 2. | | | 3. Owner of well: ALBERT HALFMANN R.R. or street: S 05 E RUTLEDGE City, state, zip code: YATES CENTER | | |
| 4. Locate with "X" in section below:  | | Sketch map:  | | 6. Bore hole dia. 7 in. Completion date 4/26/81 Well depth 65 ft. | |
| 5. Type and color of material | | From | To | 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 | |
| TOP SOIL | | 0 | 4 | 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 | |
| SAND ROCK | | 4 | 8 | 9. Casing: Material PLTS Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 3/4 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 6 in. to 25 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 200 | |
| SOLID BWS SAND ROCK | | 8 | 22 | 10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? <input type="checkbox"/> Size range of material _____ | |
| YELLOW SAND ROCK | | 22 | 32 | 11. Static water level: _____ mo./day/yr. 1 ft. below land surface Date 4/26/81 | |
| WHITE SAND ROCK S.O.W. | | 32 | 44 | 12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 100 g.p.m. | |
| YELLOW SAND ROCK | | 44 | 65 | 13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____ | |
| | | | | 14. Well head completion: <input type="checkbox"/> Pitless adapter 36 Inches above grade | |
| | | | | 15. Well grouted? YES With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 20 ft. | |
| | | | | 16. Nearest source of possible contamination: ft. 60 Direction NORTH Type BARN Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | 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 | |
| 18. Elevation: | | 19. Remarks: MR HALFMANN IS GOING TO RUN HIS PUMP | | 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 312 Business name _____ License No. _____ Address TOPEKA KAN Signed Steve Cummings Date 4/26/81 Authorized representative | |

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

Form WWC-5

T 25
 R 15
 Sec 11 - SE NE 1/4
 1/4 1/4 3/4