

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 <b>SEDGWICK</b>	Fraction <b>NW 1/4 SE 1/4 SW 1/4</b>	Section number <b>25</b>	Township number <b>T 25 S</b>	Range number <b>R 2 E</b>															
2. Distance and direction from nearest town or city: <b>1 1/2 W. 3 No.</b>			3. Owner of well: <b>BLAINE BODECKER</b>																		
Street address of well location if in city: <b>1 1/2 W. of Benton (Butler Co.)</b>			R.R. or street: <b>Rt 1</b>																		
			City, state, zip code: <b>Benton, Ka, 67017</b>																		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>8 3/4</b> in. Completion date <b>6-22-78</b> Well depth <b>86</b> ft.																	
				7. <input type="checkbox"/> Cable tool <input checked="" 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				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																	
				9. Casing: Material <b>PVC</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>13</b> in. RMP <input type="checkbox"/> PVC <b>GL</b> Weight <input type="checkbox"/> lbs./ft. Dia. <b>5</b> in. to <b>76</b> ft. depth, Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth, gage No. <b>258</b>																	
<table border="1"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><b>Top soil</b></td> <td><b>0</b></td> <td><b>2</b></td> </tr> <tr> <td><b>Red CLAY</b></td> <td><b>2</b></td> <td><b>16</b></td> </tr> <tr> <td><b>LIME stone (White)</b></td> <td><b>16</b></td> <td><b>30</b></td> </tr> <tr> <td><b>SHALE (GRAY)</b></td> <td><b>30</b></td> <td><b>86</b></td> </tr> </tbody> </table>					From	To	<b>Top soil</b>	<b>0</b>	<b>2</b>	<b>Red CLAY</b>	<b>2</b>	<b>16</b>	<b>LIME stone (White)</b>	<b>16</b>	<b>30</b>	<b>SHALE (GRAY)</b>	<b>30</b>	<b>86</b>	10. Screen: Manufacturer's name <b>M.P.L.</b> Type <b>PVC</b> Dia. <b>5</b> Slot/gauge <b>25/1000</b> Length <b>10</b> Set between <b>76</b> ft. and <b>86</b> ft. ft. and ft. Gravel pack? <b>yes</b> Size range of material <b>5/10</b>		
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				11. Static water level: <input type="checkbox"/> mo./day/yr. <b>25</b> ft. below land surface Date <b>6-22-78</b>																	
				12. Pumping level below land surfaces: ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield <b>20</b> g.p.m.																	
				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <b>6-22-78</b>																	
				14. Well head completion: <b>CAP</b> <input type="checkbox"/> Pitless adapter <b>13</b> Inches above grade																	
				15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>12</b> ft.																	
				16. Nearest source of possible contamination: <b>Lagoon</b> ft. <b>300</b> Direction <b>E</b> Type <b>Lagoon</b> 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																	
(Use a second sheet if needed)																					
18. Elevation:		19. Remarks:		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. <b>Prewitt Const. 353</b> Business name License No. Address <b>130X 744</b> Signed <b>Arthur Prewitt</b> Date <b>6-22-78</b> Authorized representative																	
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