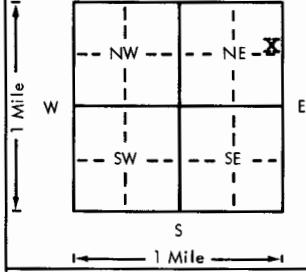


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

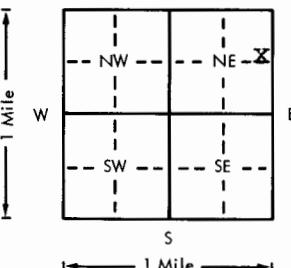
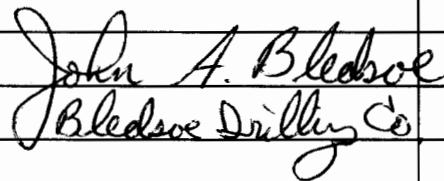
Sent to Leonard
8/18/77
Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County Butler	Fraction se 1/4 ne 1/4 ne 1/4	Section number 9	Township number T 25	Range number S R 6 NW
2. Distance and direction from nearest town or city:	3 mi. east, 5 mi.		3. Owner of well:	David Clymer R.R. or street: Box 71 City, state, zip code: El Dorado, Kansas 67042	
Street address of well location if in city:	north El Dorado, Ks.				
4. Locate with "X" in section below:	Sketch map: 		6. Bore hole dia. 8 in. Completion date Well depth 87 ft. 6-20-77		
			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		
			8. Use: <input type="checkbox"/> Domestic <input checked="" 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 _____ Height: Above or below Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____		
5. Type and color of material	From	To	10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____		
top soil black	0	1			
clay/limestone broken yellow	1	19			
limestone yellow	19	33			
shale grey	33	35			
limestone / clay soft / hard yellow	35	43	11. Static water level: mo./day/yr. 26 ft. below land surface Date 6-20-77		
shale grey	43	49	12. Pumping level below land surfaces: ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield 4 gpm g.p.m.		
shale / rock aquifer 74' grey	49	77	13. Water sample submitted: mo./day/yr. Yes _____ No _____ Date _____		
rock soft light yellow	77	86	14. Well head completion: Pitless adapter _____ Inches above grade		
shale grey	86	87	15. Well grouted? _____ With: Neat cement _____ Bentonite _____ Concrete _____ Depth: From _____ ft. to _____ ft.		
These wells were drilled as test wells for the development of the land for the housing of about 21 homes. It was my understanding that if the wells were put into use that Bledsoe Drilling Co. would finish the wells. When I contacted Mr. Clymer to finish the wells, he informed me that he was having Layne Western finish the wells instead of Bledsoe Drilling Co. so I can't furnish you with all the information ask for on the log. second sheet (Use a second sheet if needed)			16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? Yes _____ No _____		
18. Elevation:	19. Remarks:		17. Pump: Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other _____		
Topography: Hill _____ Slope _____ <input checked="" type="checkbox"/> Upland _____ Valley _____			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. Bledsoe Drilling Co. 349 Business name _____ License No. _____ Address _____ Signed <u>John A. Bledsoe</u> 815-91 Authorized representative _____		

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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 Butler	Fraction se 1/4 ne 1/4 ne 1/4	Section number 9	Township number T 25	Range number S R 6 0/W
2. Distance and direction from nearest town or city: Street address of well location if in city:	3 mi. east, 5 mi. north El Dorado Ks.				
3. Owner of well: R.R. or street: City, state, zip code:	David Clymer Box 71 El Dorado, Kansas 67042				
4. Locate with "X" in section below: 	Sketch map:	6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>87</u> ft. <u>6-20-77</u>			
5. Type and color of material (continued from page 1)	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		
I informed Mr. Clymer that a permit for public water would have to be obtained from the State and that if he didn't put the wells into use that they would have to be plugged. Mr. Clymer was informed of this by myself, before the wells were drilled, and he stated that all permits had been taken care of and that he understood all that had to be done.			8. Use: <input type="checkbox"/> Domestic <input checked="" 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 _____ Height: Above or below Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth! Wall Thickness: inches or Dia. _____ in. to _____ ft. depth! gage No. _____		
			10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____		
			11. Static water level: <u>26</u> ft. below land surface Date <u>6-20-77</u> mo./day/yr.		
			12. Pumping level below land surfaces: ft. after _____ hrs. pumping _____ g.p.m. ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>4 gpm</u> g.p.m.		
			13. Water sample submitted: Yes <input checked="" type="checkbox"/> No Date _____ mo./day/yr.		
			14. Well head completion: Pitless adapter _____ Inches above grade		
			15. Well grouted? With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From _____ ft. to _____ ft.		
			16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? Yes <input type="checkbox"/> No _____		
			17. Pump: <input 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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	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. Business name _____ License No. _____ Address _____ Signed _____ Authorized representative _____ Date _____		

25-60-9
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