

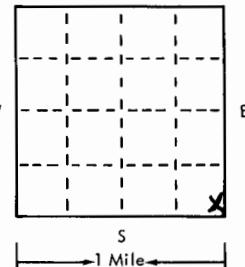
USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

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

SE SE SE

1 Location of well:	County <b>Butler</b>	Township name <b>Bruno</b>	Fraction <b>SE 1/4</b>	Section number <b>21</b>	Town number <b>T275</b>	Range number <b>R3E</b>
Distance and direction from nearest town or city: <b>2 miles south 2 miles east Andover Kans</b>			3 Owner of well: <b>Charles Boucher Route 1 Augusta Kans</b>			
Street address of well location if in city: <b>2 miles south 2 miles east Andover Kans</b>			Address: <b>Route 1 Augusta Kans</b>			
Locate with "X" in section below: 			Sketch map:			
4 Well depth: <b>120</b> ft. Date of completion <b>July 17, 1975</b> Well diameter <b>7</b> in.						
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 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/> Spacing						
7 Casing: Material <b>Steel</b> Height: <b>above</b> ground Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. Diam. <b>10</b> in. to <b>10</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>10</b> in. to <b>120</b> ft. depth						
8 Screen: <b>Sunflower Plastic Inc</b> Manufacturer <b>Wichita Kans</b> Type <b>R.m.P.</b> Dia. <b>6</b> Slot/gauze <b>1/8</b> Length <b>20</b> Set between <b>100</b> ft. and <b>120</b> ft. Fittings: Gravel pack <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material _____						
9 Static water level: <b>80</b> ft. below land surface Date <b>July 17, 1975</b>						
10 Pumping level below land surfaces: <b>80</b> ft. after _____ hrs. pumping _____ g.p.m. ____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>207</b> g.p.m.						
11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____						
12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>10</b> 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 <b>10</b> ft. to <b>0</b> ft.						
14 Nearest source of possible contamination: ft. <b>150</b> Direction <b>North</b> Type <b>Septic</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
15 Pump: Manufacturer's name <b>South</b> Model number <b>1EF</b> HP <b>1/2</b> Volts <b>115</b> Length of drop pipe <b>10</b> ft. capacity <b>10</b> g.m.p. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other						
16 Remarks: elevation  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley						
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. <b>Murray Weller</b> Business name <b>Augusta Ks 132</b> License No. _____ Address _____ Signed <b>Murray Weller</b> Date <b>July 17, 1975</b> Authorized representative _____						

Forward the white, blue and pink copies to the Kansas State Dept. of Health.

Form WWC-5