

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

1 Location of well:	County Butler	Township name Spring	Fraction NW 1/4	Section number 16	Town number T27S	Range number R5E
Distance and direction from nearest town or city:	1 mile north 3 miles east Augusta Kans			3 Owner of well:	Mary Schnelder Route 2 Augusta Kans	
Street address of well location if in city:				Address:		
Locate with "X" in section below:	Sketch map:			4 Well depth: 50 ft. Date of completion July 10 1975 Well diameter 7 in.		
				5 ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary		
				6 Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ☐		
				7 Casing: Material aluminum Height: above/below Threaded ☐ Welded ☒ Surface 2 in. Diam. 10 in. to 10 ft. depth Weight 15 lbs./ft. 7 in. to 50 ft. depth Drive shoe? ☐ Yes ☒ No		
2 Type and color of material				From	To	8 Screen: Sunflower Plastic Inc Manufacturer Wichita Kans Type R.M.P Dia. 6 Slot gauge 1/16 Length 20 ft Set between 20 ft. and 40 ft. Fittings: Gravel pack ☐ Yes ☒ No Size range of material
Red Clay				0	5	9 Static water level: 15 ft. below land surface Date July 10 1975
yellow lime				5	25	10 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.
water				25		11 Water sample submitted: ☐ Yes ☒ No Date
gray lime				25	50	12 Well head completion: ☐ Pitless adapter ☒ 12 inches above grade
owner will put on slab						13 Well grouted? ☒ Yes ☐ No ☒ Neat cement ☐ Bentonite ☐ Depth: From 10 ft. to 0 ft.
						14 Nearest source of possible contamination: nothing within 1/4 mile either direction ft. ____ Direction ____ Type 1/4 Well disinfected upon completion? ☒ Yes ☐ No
						15 Pump: ☒ Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.m.p. Type: ☐ Submersible ☐ Turbine ☐ Jet ☐ Reciprocating ☐ Centrifugal ☐ Other
(use a second sheet if needed)						
16 Remarks: elevation				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. Shirley W. Ke License No. 122 Augusta Kans Signed _____ Date July 10 1975 Authorized representative		
Topography: ☒ Hill ☐ Slope ☐ Upland ☐ Valley						