

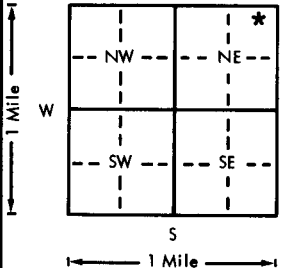
40-a

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

AAA

1. Location of well:	County Brown	Fraction NE 1/4 NE 1/4 NE 1/4	Section number 35	Township number T 2 S	Range number R 18E
2. Distance and direction from nearest town or city: 1 1/2 Miles North, 2-3/4 Mile East Street address of well location if in city: Robinson, Kansas			3. Owner of well: State of Kansas R.R. or street: State Office Building City, state, zip code: Topeka, Kansas		
4. Locate with "X" in section below: N W E S 1 Mile Sketch map:  Well location as shown on Plans. Sta. 698+88, 276' Rt. CL Project (BC)36-7-RF-092-5 (14).			6. Bore hole dia. _____ in. Completion date _____ Well depth _____ ft.		
5. Type and color of material			7. _____ Cable tool _____ Rotary _____ Driven _____ Dug _____ Hollow rod _____ Jetted _____ Bored _____ Reverse rotary		
4' Dia. x 33.9' Dug Well(Unconfined)(Special). Backfilled with 16 C. Y. Granular Material. (Type Used-Conc. Sand FA-A) to within 18" of surface and cap with earth. Filled May 9, 1977 according to State statutes. Well capped according to plans on project 36-7-RF-092-5 (14).			8. Use: _____ Domestic _____ Public supply _____ Industry _____ Irrigation _____ Air conditioning _____ Stock _____ Lawn _____ Oil field water _____ Other		
Harold E. Arnold, Resident Engineer Kansas Department of Transportation			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. _____		
(Use a second sheet if needed)			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: _____ mo./day/yr. _____ ft. below land surface Date _____		
			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. Yes _____ No _____ Date _____		
			14. Well head completion: _____ Pitless adapter _____ Inches above grade		
			15. Well grouted? _____ With: _____ Neat cement _____ Bentonite _____ Concrete Depth: From _____ ft. to _____ ft.		
			16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? Yes _____ No _____		
			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		
18. Elevation: 1020 Topography: _____ Hill _____ Slope _____ Upland _____ 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 _____ Date _____ Authorized representative		

BR

2
120
35
NE
1/4
1/4
1/4