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

WATER WELL RECORD
KSA 82a-1201-1215

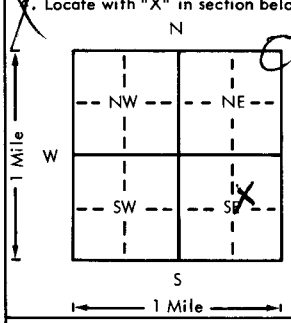
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Marshall	X SW 1/4 NE 1/4 SE 1/4	7	T 2 South S	R 6 east E/W

2. Distance and direction from nearest town or city: Bremen 3/4 mi South and 1/4 mi West
Street address of well location if in city:

3. Owner of well: Melvin Stohs
R.R. or street:
City, state, zip code: Bremen Kans 66412

4. Locate with "X" in section below:



Sketch map: Bremen

6. Bore hole dia. 11 in. Completion date 11-25-77
Well depth 93 ft.

7. X Cable tool __ Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning X Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material PVC Height: (Above) or below
Threaded __ Welded __ Surface 12 in.
RMP __ PVC X Weight __ lbs./ft.
Dia. 5 in. to 93 ft. depth Wall Thickness: inches .26 Wall
Dia. __ in. to __ ft. depth gage No. __

5. Type and color of material	From	To
Old Casing pulled out of old well		
Well cleaned out & new P.V.C. Casing installed		
(Use a second sheet if needed)		

10. Screen: Manufacturer's name M.P.I.
Type PVC Dia. 5"
Slot/gauge .050 Length 40'
Set between 40 ft. and 80 ft.
__ ft. and __ ft.
Gravel pack? X Size range of material 6 X 4

11. Static water level: mo./day/yr.
X 50 ft. below land surface Date X 11-25-77

12. 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.

13. Water sample submitted: mo./day/yr.
__ Yes X No Date __

14. Well head completion: NA
__ Pitless adapter __ Inches above grade

15. Well grouted? X
With: X Neat cement __ Bentonite __ Concrete
Depth: From 15 ft. to 5 ft.

16. Nearest source of possible contamination:
ft. 500 Direction East Type Hog lot
Well disinfected upon completion? X Yes __ No

17. Pump: X 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:

Topography:
__ Hill
__ Slope
X 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.
Strader Drilling Co. 237
Business name License No.
Address Blue Rapids
Signed Harold Strader Date 11-25
Authorized representative

T 2 R 6 E W Sec 7 1/4 1/4 1/4 SW NE SE

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5