

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 <b>MARSHAL</b>	Fraction <b>NE 1/4 NE 1/4 SE 1/4</b>	Section number <b>3</b>	Township number <b>T 3 S</b>	Range number <b>R 8 E/W</b>																								
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: R.R. or street: City, state, zip code:																										
2. Distance and direction from nearest town or city: <b>1 E 1.5 S</b> Street address of well location if in city: <b>OF HOME, KS.</b>			3. Owner of well: <b>H. D. Wullsheleger</b> R.R. or street: City, state, zip code: <b>RRI FRANKFORT</b>																										
4. Locate with "X" in section below:			6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>120</u> ft. <u>6-8-76</u>																										
Sketch map: 			7. <input type="checkbox"/> Cable tool <input checked="" 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																										
5. Type and color of material			8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other																										
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;">Type and color of material</th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td>TOP SOIL</td> <td>0</td> <td>4</td> </tr> <tr> <td>BROWN CLAY</td> <td>4</td> <td>50</td> </tr> <tr> <td>GREY LIME</td> <td>50</td> <td>56</td> </tr> <tr> <td>GREY SHALE</td> <td>56</td> <td>77</td> </tr> <tr> <td>BROWN LIME (5 gpm)</td> <td>77</td> <td>80</td> </tr> <tr> <td>BLUE SHALE</td> <td>80</td> <td>115</td> </tr> <tr> <td>RED SHALE</td> <td>115</td> <td>120</td> </tr> </tbody> </table>			Type and color of material	From	To	TOP SOIL	0	4	BROWN CLAY	4	50	GREY LIME	50	56	GREY SHALE	56	77	BROWN LIME (5 gpm)	77	80	BLUE SHALE	80	115	RED SHALE	115	120	9. Casing: Material <u>PVC</u> Height <u>Above or below</u> Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in. RMP <input type="checkbox"/> PVC <u>4L</u> Weight <u>2.58</u> lbs./ft. Dia. <u>5</u> in. to <u>120</u> ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. <u>2.79</u>		
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			10. Screen: Manufacturer's name _____ <u>PUMPCO</u> Type <u>PVC</u> Dia. <u>5</u> Sig./gauze <u>1060</u> Length <u>20</u> Set between <u>70</u> ft. and <u>90</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 x 1/8</u>																										
			11. Static water level: _____ mo./day/yr. <u>79</u> ft. below land surface Date <u>6-8-76</u>																										
			12. Pumping level below land surfaces: <u>AIR TEST</u> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>5</u> g.p.m.																										
			13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____																										
			14. Well head completion: <u>CAP</u> <input type="checkbox"/> Pitless adapter <u>24</u> inches above grade																										
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>2</u> ft. to <u>15</u> ft.																										
			16. Nearest source of possible contamination: ft. <u>150</u> Direction <u>NE</u> Type <u>SEPTIC</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																										
			17. Pump: <input checked="" 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:		19. Remarks:		20. Water well contractor's certification:																									
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		<b>OWNER WILL INSTAL SLAB</b>		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>STANLEY DAHLG &amp; SON 182</u> Business name License No. Address <u>RT1 HOLLAND, KS</u> Signed <u>Dale Rabow</u> Date <u>6-10-76</u> Authorized representative																									