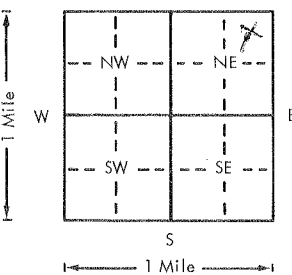


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 <u>Washington</u> Fraction <u>NE 1/4 NE 1/4 NE 1/4</u> Section number <u>29</u> Township number <u>4S</u> Range number <u>2 East</u> E/W	
2. Distance and direction from nearest town or city: <u>7 from Linn</u> Street address of well location if in city: <u>7 West 1/4 South on Westside</u> 3. Owner of well: <u>Art Dettmer</u> R.R. or street: <u>RR</u> City, state, zip code: <u>Linn, Kansas</u>	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
	From To
<u>top soil</u>	<u>0</u> <u>2</u>
<u>clay, red</u>	<u>2</u> <u>15</u>
<u>clay, yellow</u>	<u>15</u> <u>30</u>
<u>clay, blue</u>	<u>30</u> <u>35</u>
<u>Rock Sand-Rocks yellow</u>	<u>35</u> <u>42</u>
<u>clay, red</u>	<u>42</u> <u>50</u>
<u>clay sandy & water</u>	<u>50</u> <u>74</u>
(Use a second sheet if needed)	
18. Elevation: <u>1390'</u> Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:
6. Bore hole dia. <u>7 1/2</u> in. Completion date <u>8-25-78</u> Well depth <u>74</u> ft.	
7. <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	
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	
9. Casing: Material <u>PVC</u> Height <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u> </u> lbs./ft. Dia. <u>5</u> in. to <u>7 1/2</u> ft. depth Wall thickness: <u>2.67</u> Wall Dia. <u> </u> in. to <u> </u> ft. depth Gauge No. <u> </u>	
10. Screen: Manufacturer's name <u>M.P.I.</u> Type <u>PVC</u> Dia. <u>5</u> Slot/gauze <u>.030</u> Length <u>30</u> Set between <u>74</u> ft. and <u>54</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4" X 1/4"</u>	
11. Static water level: <u>50</u> ft. below land surface Date <u>8-25-78</u> mo./day/yr.	
12. Pumping level below land surfaces: <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>4</u> g.p.m.	
13. Water sample submitted: <u> </u> Yes <input checked="" type="checkbox"/> No Date <u> </u> mo./day/yr.	
14. Well head completion: <u>NA</u> Pitless adapter <u> </u> Inches above grade	
15. Well grouted? <input checked="" type="checkbox"/> With: <u>Concrete</u> <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From <u>15</u> ft. to <u>5</u> ft.	
16. Nearest source of possible contamination: <u>400</u> ft. Direction <u>EAST</u> Type <u>Septic tank</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 <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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	
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. <u>Strader Drilling Co.</u> Business name <u>Blue Rapids</u> License No. <u> </u> Address <u> </u> Signed <u>Harold Strader</u> Date <u>8-25-78</u> Authorized representative	

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

Form WWC-5