

Sent to Leonard 5-23-77

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>SW 1/4 SW 1/4 NE 1/4</u>	Section number <u>29</u>	Township number <u>T 4 S</u>	Range number <u>R 3 E/W</u>
2. Distance and direction from nearest town or city: <u>1.5 W OF</u>			3. Owner of well: <u>CITY OF LINN</u>			
Street address of well location if in city: <u>LINN</u>			R.R. or street: City, state, zip code: <u>South well #6</u>			
4. Locate with "X" in section below:			Sketch map:		6. Bore hole dia. <u>18</u> in. Completion date Well depth <u>110</u> ft. <u>5-8-77</u>	
					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			From	To	8. Use: <input type="checkbox"/> Domestic <input checked="" 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>STEEL</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>36</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>8</u> in. to <u>110</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>322</u>	
TOP SOIL			0	4	10. Screen: Manufacturer's name <u>JOHNSON</u>	
SANDY SHALE			4	50	Type <u>STAINLESS</u> Dia. <u>8</u> Telescopic Slot gauge <u>22</u> Length <u>90</u> Set between <u>70</u> ft. and <u>110</u> ft. _____ ft. and _____ ft.	
SANDSTONE			50	110	Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>x030x060</u>	
SHALE, GREY			110	120	11. Static water level: _____ mo./day/yr. <u>50</u> ft. below land surface Date <u>5-8-77</u>	
					12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>300</u> g.p.m.	
					13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date _____	
					14. Well head completion: <u>STEEL PLATE</u> <input type="checkbox"/> Pitless adapter <u>36</u> <u>Welded</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>0</u> ft. to <u>20</u> ft.	
					16. Nearest source of possible contamination: ft. <u>200</u> Direction <u>E</u> Type <u>DRAINAGE</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 _____ Valts _____ 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: <u>1407</u>		19. Remarks: <u>we will install slab</u>		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>STRADEN DRUG CO. INC 182</u> Business name License No. Address <u>RT 1 HOLTAN, MS</u> Signed <u>Jay Johnson</u> Date <u>5-9-77</u> Authorized representative		

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R
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W
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9
SW 1/4 NE 1/4

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

Form WWC-5