41

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

WATER WELL RECORD
KSA 82a-1201-1215

dba

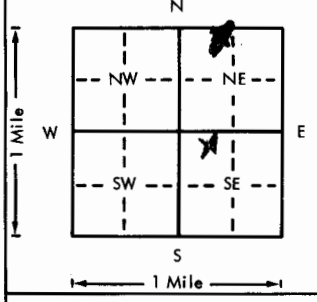
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Jackson	NE NW SE ~~NE NW NE~~ 1/4	4	T 5 S	R 15 E/W

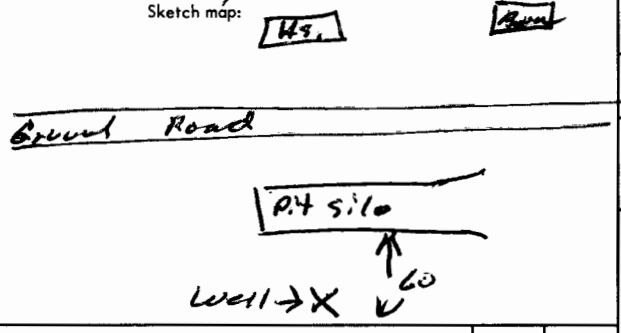
2. Distance and direction from nearest town or city: 3 N ½ W
Street address of well location if in city: Netawaka, Ks

3. Owner of well: Norman Shurley
R.R. or street: RR
City, state, zip code: Netawaka, Ks.

4. Locate with "X" in section below:



Sketch map:



6. Bore hole dia. 8 in. Completion date 8-30-77
Well depth 85 ft.

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

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

9. Casing: Material PVC Height: Above or below
Threaded ___ Welded ___ Surface 24 in.
RMP ___ PVC Glue Weight 2.74 lbs./ft.
Dia. 5 in. to 85 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. .258

5. Type and color of material	From	To
Top Soil	0	2
Brown Clay	2	6
Brown Sandy Clay	6	16
Brown Clay	16	18
Gray Clay	18	52
Brown Clay	52	58
Brown Sandy Clay	58	74
Brown Clay	74	85

(Use a second sheet if needed)

10. Screen: Manufacturer's name Pumpco
Type PVC Dia. 5"
Slot/gauze .020 Length 30
Set between 55 ft. and 85 ft.
___ ft. and ___ ft.
Gravel pack? X Size range of material .030-.060

11. Static water level: mo./day/yr.
65 ft. below land surface Date 8-31-77

12. Pumping level below land surfaces:
70 ft. after 2 hrs. pumping 15 g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 20 g.p.m.

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

14. Well head completion: TopCap
__ Pitless adapter 24 Inches above grade

15. Well grouted? Yes
With: X Neat cement ___ Bentonite ___ Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination: Pit
ft. 60 Direction N Type Silo
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

Elevation: 114
graphy:
Hill
Slope
Upland
Valley

19. Remarks: Owner to pour cement slab.

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 Drlg Co 182
Business name License No.
Address RT1 Holton, Ks
Signed Dale Ashren Date 9-1-77
Authorized representative

T 5 R 15 W E Sec 4 NE NW NE 1/4 1/4 1/4

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

Form WWC-5

MI-1023