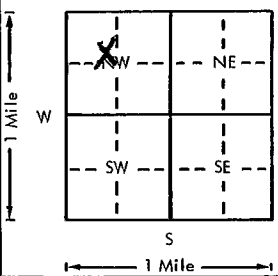


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Washington	Fraction SE 1/4 NW 1/4 NW 1/4	Section number 8	Township number T 5 S	Range number R 5 E	E/W
2. Distance and direction from nearest town or city: 5 mi South 1/2 W		3. Owner of well: Frank Weiche		R.R. or street: Barnes Kans			
Street address of well location if in city: 1/4 Southeast		City, state, zip code: Barnes Kans					
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 10 in. Completion date Well depth 190 ft. 12-15-78			
				7. ☒ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary			
5. Type and color of material		From	To	8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other			
top soil, Black		0	2	9. Casing: Material PVC Height: 17 in. Threaded ☐ Welded ☐ Surface ☐ in. RMP ☐ PVC ☒ Weight 17 lbs./ft. Dia. 5 in. to 190 ft. depth Wall Thickness: 267 Wall			
Sand stone, Red		2	42	10. Screen: Manufacturer's name M.P.I. Type P.V.C. Dia. 5" Slot/groove 0.40 Length 40 Set between 150 ft. and 190 ft. Gravel pack? ☒ Size range of material 8-14			
clay yellow		42	47	11. Static water level: 150 ft. below land surface Date 12-15-78 mo./day/yr.			
Shale, Blue		47	50	12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 12 g.p.m.			
Rock, yellow-lime		50	70	13. Water sample submitted: ____ mo./day/yr. Yes ☒ No ☐ Date			
Shale, Red		70	90	14. Well head completion: NA ____ Pitless adapter ____ Inches above grade			
Rock, yellow-lime		90	105	15. Well grouted? ☒ 1-2 With: ☐ Neat cement ☐ Bentonite ☒ Concrete Depth: From 15 ft. to 5 ft.			
Shale, Blue		105	110	16. Nearest source of possible contamination: ft. 70 Direction NORTH Type old well Well disinfected upon completion? ☒ Yes ☐ No			
Shale, Red		110	155	17. Pump: ☒ 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			
Rock yellow lime (water)		135	165	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. Shades Drilling Co. 2374 Business name Blue Rapids License No. ____ Address Barold Blader Signed Barold Blader Date 12-19-78 Authorized representative			
Shale Red		165	190				
(Use a second sheet if needed)							
18. Elevation: 1410'		19. Remarks:					
Topography: ☒ Hill ☐ Slope ☐ Upland ☐ Valley							

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

Form WWC-5