

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

T R EW sec 1/4 1/4 1/4 No.

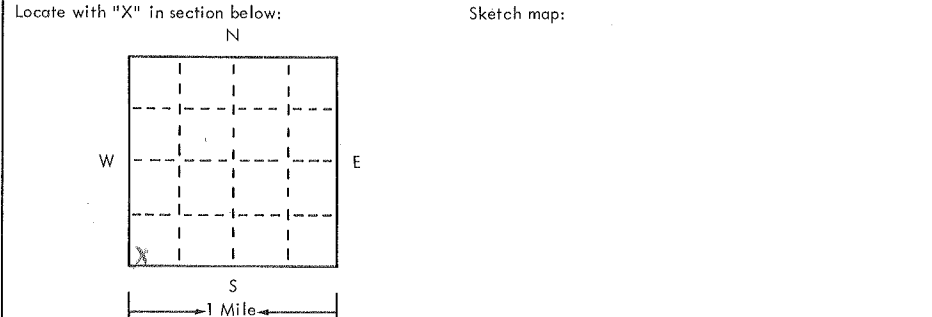
WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

SWSWSW

1 Location of well: County Marshall Township name Cottage Hill Fraction S.W. 1/4 Section number 22 Town number 55 Range number 6E

Distance and direction from nearest town or city: 6 M. south of Waterville
Street address of well location if in city:
3 Owner of well: Don Petter
Address: Waterville Kans.



4 Well depth: 120 ft. Date of completion 10/28/74
Well diameter 5 1/2 in.
5 Cable tool Rotary Driven Dug
 Hollow rod Jetted Bored Reverse rotary
6 Use: Domestic Public supply Industry
 Irrigation Air conditioning Commercial
 Test well
7 Casing: Material PVC Height: above/below
Threaded Welded Surface 2 1/2 in.
Digm. Cement Weight _____ lbs./ft.
5 in. to 120 ft. depth Drive shoe? Yes No
_____ in. to _____ ft. depth Well Plug

2	Type and color of material	From	To
	<u>Top Soil Brown Clay</u>	<u>0</u>	<u>10</u>
	<u>Brown Clay</u>	<u>10</u>	<u>50</u>
	<u>Lime Stone & Clay</u>	<u>50</u>	<u>65</u>
	<u>Lime Rock</u>	<u>65</u>	<u>75</u>
	<u>Brown Clay & Lime Rock</u>	<u>75</u>	<u>80</u>
	<u>Lime Rock</u>	<u>80</u>	<u>90</u>
	<u>Lime Rock & Broken layers</u>	<u>90</u>	<u>100</u>
	<u>Lime Rock & Broken layers</u>	<u>100</u>	<u>110</u>
	<u>Blue Shale</u>	<u>110</u>	<u>115</u>
	<u>Blue Shale</u>	<u>115</u>	<u>120</u>

8 Screen: Manufacturer Homade
Type Slotted PVC Dia. 5"
Slot/gauze 80 Length 20
Set between 100 ft. and 120 ft.
Fittings: Gravel pack Yes No Size range of material _____
9 Static water level: 85 ft. below land surface Date 10/28/74
10 Pumping level below land surfaces:
_____ ft. after _____ hr. pumping _____ g.p.m.
_____ ft. after NA hr. pumping _____ g.p.m.
Estimated maximum yield _____ g.p.m.
11 Water sample submitted:
 Yes No Date _____
12 Well head completion:
 Pitless adapter Inches above grade
13 Well grouted? Yes No
 Neat cement Bentonite Puddle Clay
Depth: From 0 ft. to 10 ft.
14 Nearest source of possible contamination:
ft. _____ Direction _____ Type _____
Well disinfected upon completion? Yes No
15 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

16 Remarks: elevation 1420'
Topography:
 Hill
 Slope
 Upland
 Valley
(use a second sheet if needed)

17 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.
Harpers Drlg. Service
Business name _____ License No. _____
Address Blue Rapids 196
Signed D. S. Harpe Date 10-28-74
Authorized representative