

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 <b>Marshall</b>	Fraction <b>SW 1/4 NE 1/4 NW 1/4</b>	Section number <b>18</b>	Township number <b>T 5 South</b>	Range number <b>R 7 East E/W</b>																		
2. Distance and direction from nearest town or city: <b>4 1/2 mi South of Blue Rapids on oil Road West Side</b>		3. Owner of well: <b>Alfred Pishney</b>		R.R. or street: <b>Blue Rapids Kans</b>																				
4. Locate with "X" in section below:		Sketch map:			6. Bore hole dia. <b>1 1/2</b> in. Completion date Well depth <b>50</b> ft. <b>10-30-78</b>																			
		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>5. Type and color of material</th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td><b>top Soil</b></td> <td><b>0</b></td> <td><b>3</b></td> </tr> <tr> <td><b>Clay</b></td> <td><b>3</b></td> <td><b>15</b></td> </tr> <tr> <td><b>gravel &amp; mud water</b></td> <td><b>15</b></td> <td><b>22</b></td> </tr> <tr> <td><b>Rock Blue</b></td> <td><b>22</b></td> <td><b>33</b></td> </tr> <tr> <td><b>Shale Blue</b></td> <td><b>33</b></td> <td><b>30</b></td> </tr> </tbody> </table>			5. Type and color of material	From	To	<b>top Soil</b>	<b>0</b>	<b>3</b>	<b>Clay</b>	<b>3</b>	<b>15</b>	<b>gravel &amp; mud water</b>	<b>15</b>	<b>22</b>	<b>Rock Blue</b>	<b>22</b>	<b>33</b>	<b>Shale Blue</b>	<b>33</b>	<b>30</b>	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	
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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 <b>PVC</b> Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>1 1/2</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <b>5</b> in. to <b>30</b> ft. depth Wall Thickness: <b>267</b> Dia. _____ in. to _____ ft. depth gage No. _____																						
18. Elevation:  Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		19. Remarks:  (Use a second sheet if needed)		10. Screen: Manufacturer's name <b>MPI</b> Type <b>PVC</b> Dia. <b>5"</b> Slot/g <b>.040</b> Length <b>25</b> Set between <b>15</b> ft. and <b>40</b> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/8 to 1/4</b>																				
				11. Static water level: _____ mo./day/yr. <b>15</b> ft. below land surface Date <b>10-30-78</b>																				
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <b>10</b> g.p.m.																				
				13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____																				
				14. Well head completion: <b>NA</b> <input type="checkbox"/> Pitless adapter _____ Inches above grade																				
				15. Well grouted? <input checked="" type="checkbox"/> <b>1-2</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>15</b> ft. to <b>5</b> ft.																				
				16. Nearest source of possible contamination: ft. <b>400</b> Direction <b>West</b> Type <b>Creek</b> 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 _____ Volts _____ 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																				
				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. <b>Strader Drilling Co. 237</b> Business name <b>Blue Rapids</b> License No. _____ Address _____ Signed <b>Harold Stuber</b> Date <b>10-30-78</b> Authorized representative																				

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

Form WWC-5