

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>POTTAWATOMIE</u>	Fraction: <u>NW 1/4 NW 1/4 NW 1/4</u>	Section number: <u>26</u>	Township number: <u>T 6 S 11 R</u>	Range number: <u>EW</u>
2. Distance and direction from nearest town or city: <u>1 N 6 E</u>			3. Owner of well: <u>LARRY BRONCO</u>		
Street address of well location if in city: <u>OF ONAGA, KS.</u>			R.R. or street: _____ City, state, zip code: <u>ONAGA, KS. RR1</u>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>10</u> in. Completion date _____ Well depth <u>65</u> ft. <u>10-12-77</u>	
				7. <input checked="" 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 type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
				9. Casing: Material <u>PVC</u> Height: Above or below Threaded _____ Welded _____ Surface <u>34</u> in. RMP _____ PVC <u>46</u> Weight <u>2.58</u> lbs./ft. Dia. <u>5</u> in. to <u>65</u> ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. <u>1277</u>	
				10. Screen: Manufacturer's name <u>PUMPCOMP</u> Type <u>PVC</u> Dia. <u>5</u> <u>60</u> gauge <u>.020</u> Length <u>10</u> Set between <u>45</u> ft. and <u>65</u> ft. ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>10/30 X 16/20</u>	
				11. Static water level: _____ mo./day/yr. <u>30</u> ft. below land surface Date <u>10-12-77</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>100</u> g.p.m.	
				13. Water sample submitted: _____ mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____	
				14. Well head completion: <u>CAP</u> _____ Pitless adapter <u>29</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>15</u> ft.	
				16. Nearest source of possible contamination: ft. <u>300</u> Direction <u>W</u> Type <u>LOTS</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 _____ 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	
		(Use a second sheet if needed)			
18. Elevation:	19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley	<u>OWNER TO INSURE SIAB</u>		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>STRADER DRILLING CO INC 182</u> Business name _____ License No. _____ Address <u>HOLTON, KS</u> Signed <u>DAVE CISHAM</u> Date <u>10-11-77</u> Authorized representative		

T-6
 S-11
 R-11
 Sec-26
 NW 1/4 NW 1/4 NW 1/4